

(COM)MODIFYING THE SACRED: THE
INCORPORATION AND ADAPTATION OF NON-
WESTERN MEDICINE INTO THE WELLNESS
TOURISM MARKET

by

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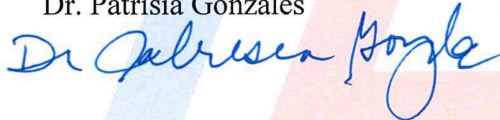
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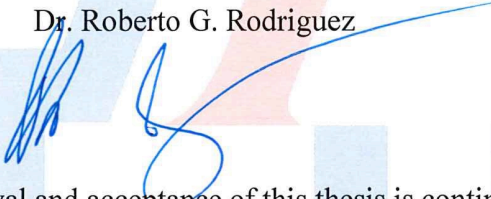
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TABLE OF CONTENTS

<u>ABSTRACT</u>	<u>6</u>
<u>INTRODUCTION</u>	<u>7</u>
<u>CHAPTER 1: SOCIO-CULTURAL FRAMEWORK: THERAPEUTIC CULTURE AND NEW UNDERSTANDINGS OF HEALTH</u>	<u>15</u>
<u>CHAPTER 2: NON-WESTERN MEDICINE IN THE WELLNESS INDUSTRY</u>	<u>23</u>
<u>2.1. The wellness tourism sector</u>	<u>26</u>
<u>→ The marketing discourse of the wellbeing</u>	<u>31</u>
<u>CHAPTER 3: IMAGINING “THE HEALER” AND PRODUCING CULTURAL HYBRIDS</u>	<u>33</u>
<u>3.1. Processes of translation to the western market</u>	<u>33</u>
<u>3.2. Creating the healer in the western imaginary: The Noble Savage</u>	<u>36</u>
<u>3.3. On Indigenous knowledge and cultural appropriation: A focus on Mexico and the United States</u>	<u>41</u>
<u>→ The case of medicinal heritage’s revitalization in Mexico</u>	<u>45</u>
<u>CHAPTER 4: CASE STUDY: THE PRE-HISPANIC TEMAZCAL IN THE TOURISM INDUSTRY OF TULUM, MEXICO</u>	<u>48</u>
<u>4.1. Introduction</u>	<u>48</u>
<u>→ Native healing and the Mexican Ministry of Tourism</u>	<u>50</u>
<u>→ The temazcal</u>	<u>51</u>

→ The study setting	56
4.2. Results	58
→ Producing Tulum: The Tuluminati	58
→ Temazcaleros	64
→ Tourists	68
→ On cultural appropriation	70
4.3. Discussion and conclusions	73
FINAL CONCLUSIONS	77
VISUAL APPENDIX	80
REFERENCES	87

ABSTRACT

In the last two to three decades, non-mainstream medicine has become a well-known face of the wellness market. Non-mainstream healing constitutes the health and tourism itineraries of a western costumer oriented to self-care and holistic wellbeing. On one hand, these decisions are framed by a western tendency to psychologize our social relationships and seek self-fulfillment in foreign spiritualities. On the other, cultural globalization, the New Age, and new tourisms have contributed to this insertion. Through a de-contextualization of their original cultures and a re-contextualization in western frames, non-mainstream healing is reinvented to adapt to the capitalist economy and the tourist gaze. Such event has aggravated the debate on cultural appropriation of indigenous knowledge. The accommodation of the pre-Hispanic sweat lodge to the hotel industry of Tulum, Mexico, illustrates the present phenomenon. Local healers and hotels negotiate the identity of this ancestral therapeutic ritual, creating a wellness product that bounces between “the hippie” and the luxury in a setting that markets indigenous spirituality. Through a literature review and an ethnographic case study conducted by the author, the present work contributes to understand why and how non-western medicines are constructed within the capitalist wellness market.

INTRODUCTION

The incorporation of non-western medicines into the wellness tourism industry is a complex phenomenon that comes from decades of socio-cultural transformations in the western world. These movements have configured new intersections between health, spirituality, tourism and the capitalist market so that, behind the interest in a shamanic cleansing ritual, there is a new way of understanding health, the relationship with oneself and the indigenous Other. Moreover, the commodification of non-western healing is influenced by the emergence of various countercultural movements, as well as the expansion and diversification of the tourism sector. However, western global capitalism and indigenous cultures have different baseline paradigms that include different and antagonist goals, paces, organizing principles, rationalities, knowledge, and even “sanctities”. In its insertion into the western wellness industry, non-mainstream medicine and the market negotiate the permanence and acquisition of original, foreign and reinterpreted identity markers that the new non-western healing will have.

In the interest of disclosing more of this intersection, the purpose of this thesis is to analyze the introduction and adaptation of non-mainstream medicine into the western wellness market from a socio-cultural perspective. To do so, I address the following questions: Which new notions and rationalities have grown in the western imaginary to enable this incorporation? In which way does non-conventional medicine function in the western market: as a healthcare alternative, as a critique to the western ways, as a recreational tourist attraction, or in other ways? How has the epistemological idiosyncrasies of non-western approaches been translated to fit in the market? Moreover,

which other transformations have those models undertaken in their *transculturation*¹ to the West? How has the display of non-conventional healing as tourism services impacted its communities of origin?

To contribute to answer those questions, I have conducted a mixed-method analysis. On the one hand, I conducted bibliographic research of secondary sources, including: books, articles, online conferences, debate-based podcasts, websites, blogs and online newspapers. On the other hand, I have collected qualitative data through an ethnographic approach in the Mexican Mayan Riviera, one of the most demanded holiday settings in Latin America. I focused on the sweat lodge, a pre-Hispanic medicine that is increasing its presence in the wellness tourism industry. I asked questions about why non-western medicine is re-vitalized in the market, how it is re-interpreted, the industries most interested in such integration, the consumers' profiles, the strategies that healers adopt to (re-)own their practices in the market, and how all these dynamics negotiate the identity of non-western healing heritage, both for foreigners and locals, through the ethnographic example of the sweat lodge. I discuss my methods in more detail in chapter 4, where I present the results of my research.

I arrived at this topic through previous scholarly work on medical anthropology and personal experience with non-western healing. My fieldwork trajectory includes the contentious insertion of reiki therapy at a public hospital in Sevilla, Spain (my home country); the ways that a Buddhist community in Metepec, Mexico complements their Buddhist practice with their ongoing catholic beliefs; and the impacts of tourism on the

¹ “Transculturation” in this text refers to the traveling of a culture-related element from its culture of origin to a foreign cultural context, which in the frame of this thesis alludes to importing a non-mainstream cultural element into a western context.

gastronomic heritage of the state of Oaxaca, Mexico. Outside academia, in 2008 I started practicing non-mainstream healing, such as yoga, qi gong and meditation, in search of spiritual connection. Later, I immersed myself in New Age talks, retreats, fairs and healing ceremonies in Europe and the Americas. Such events were organized by sometimes non-natives and other times native peoples. In particular, my relationship with pre-Hispanic sweat lodges initiated in Mexico six years ago, during a semester-long student exchange. Out of curiosity for the national culture, I attended different tourist and non-tourist sweat lodges. Later, in the frame of this research, I participated in a Lakota sweat ceremony in Arizona (U.S.), and landed in the touristic coast of Tulum (Mexico) to further participate in sweat ceremonies. Over these years, while I studied to become an instructor of yoga, meditation, reiki, and Nahuatl sweat lodges, I realized two things: First, the western world was experiencing the increasing expansion of a wellness industry that targeted foreign healing paradigms; and, second, the significance of the healing systems that I was studying was considerably different in their cultures of origin as compared to the way they were understood and experienced in the growing wellness industry. Thus, these two realizations drove my desire to understand “why” and “how” these models of wellness and health make sense in a society with such different historical, cultural, and epistemological backgrounds. This desire to understand laid the groundwork for this Master’s thesis in Latin American Studies.

My goal for this investigation was not to judge the commodification of non-mainstream healing against a fixed notion of “authenticity”, neither it was to take a moral stance about the concern of cultural appropriation. Nonetheless, I do acknowledge that the commodification of non-western cultures has ethical implications for the indigenous

communities that descend from those traditions, and that this is a contentious issue in debate (United Nations 2004; Aldred 2000; Jonhston 2006; Brady 2001; Consejo Nacional para la Cultura y las Artes 2004). The topic of cultural appropriation will be briefly addressed in chapter 4 (the case study), given that the cultural appropriation of the sweat lodge in Mayan Riviera is a repeated concern among the protagonists of my fieldwork.

The concepts addressed in this paper are not new, (Van Der Berghe, 1984; Urry 2010; Bauman 2013; Alter 2005; Heelas 2009; Timothy and Olsen 2006; Elbez 2017; Ayora-Diaz 2010; and so on) however, this work contributes to the literature in the following way. In researching the commodification of non-western healing, I could not find an analysis that put into conversation many of the historical, socio-cultural and discursive factors that notoriously impact how those medicines express themselves in the wellness market. This work attempts to fill that gap with a more integrative approach. It covers the imaginaries, goals and discourses behind the transformation of non-mainstream healing into wellness alternatives, and how the topic manifests in reality through the primary data of a case study.

For the sake of clarity, it is necessary to define some of the key concepts that I employ in my work. “Non-mainstream medicine”, “non-western medicine” and “non-conventional medicine” will be used interchangeably. By those terms, I refer to health care approaches that are not typically part of western medical care and/or that have origins outside of conventional western medical practice (National Center for Complementary and Integrative Health 2019). “Conventional” medicine is equivalent to “allopathic medicine”, “biomedicine” or “mainstream medicine”, referring to the

healthcare model predominant in western societies and based on the scientific method. “Pre-Hispanic medicine”, “pre-colonial medicine” or “Mexican Traditional Medicine” all refer to the various healing systems practiced by aboriginal indigenous peoples across Mexico, and that are founded on aggregate and contingent worldviews that formed pre-Columbian societies (Gonzales 2017). The concept of “touristification” indicates here the process of conversion of an object, place, or cultural expression into a tourist commodity in the western market (Del Romero Renau 2018). Lastly, this paper understands “commodification” as giving an element, whether material or immaterial, an exchange value in the capitalist market, in a way that it becomes subjected to the market rules and dynamics (Appadurai 1991).

In addition to defining specific terms, it is also important to explain the notion of commodified non-western medicine as a social construction. From a constructivist framework, and following Robbins, Hintz and Moore (2014), a social construction is “any category, condition, or thing that exists or is understood to have certain characteristics because people socially agree that it does” (121). The author’s focus on “nature” being socially constructed, as opposed to raw and frozen in time. “Nature” is comprised by unspoken assumptions such as “pristine” and “authentic.” These ideas are found within the social imaginary regarding nature, and have been agreed upon by cultural understandings, media representations, and educational institutions, among others. “Nature” is also shaped by a long history of human occupation and management, including planting, selecting species or maintaining roads (Robbins, Hintz and Moore 2014, 121).

As a social construction, non-western medicine is conducive of a *discourse* or *social imaginary*. Robbins, Hintz and Moore (2014) define “discourse” as written and spoken communications that “are not mere representations of a material world, but rather power embedded constructions that partially make the world we live in” (126). In the commodification of non-western medicine, some of the actors that produce their discourse are: the wellness industry, popular media’s discourse of therapeutic culture, countercultural or alternative ideologies (based on certain dissatisfactions with postmodern society, such as New Age adherents), the biomedical institution, and western international organizations (WHO or U.N.).

After setting some of the ontological basis of non-western medicines, we can clearly see that non-mainstream medicine cannot be simply looked at as hollow market goods, but constructs associated with concepts (class, ideology) that are attractive to a costumer’ sector or consumption trend. Thus, by commodifying non-western healing, the market and advertisement industry is selling *immaterial values* such as spirituality (Heelas 1996, 198; Urry and Larsen 2011). At the beginning of the new millennium, Rifkin (2000) expressed this idea through his concept “the age of access”:

If the age of industry (*era industrial*) fed our physical being, the age of access feeds our spiritual, emotional and mental being (...). In the twenty-first century, ideas will become the items that institutions will trade with, and people will increasingly purchase the access to those ideas and the material form that they adopt. (114)

Pierre Bourdieu (1979) argued that the current capitalism marketed “symbolic goods” provided by “cultural specialists”. In dialogue with such framework of analysis,

materialistic approaches underline that capitalism is always eager to commodify new images, since it cyclically needs to renew itself (Aldred 2000). For example, a spa advertisement presenting indigenous energy cleansing would be selling the acquisition of wellbeing (see chapter 1-2), as well as creating a discourse on the meaning of “indigenous” (chapter 3).

Likewise, tourists are not only consumers of tourism goods; they produce them. One of the basic premises of tourism studies is that tourism is a social construction of the object seen by the tourist (Urry and Larsen 2011; Lopez and Marin 2010; Cid, Fernandez and Carrasco 2019), whether his object is tangible (landscape, architecture, art) or intangible (cultural, socio-cultural rituals, knowledge, cuisine, practices, techniques). Tourism is an exercise of socio-spatial organization and cultural transformation: an industry that produces destinations, meaning, experiences, cultural commodities, and even locals. The purpose of it is the exploitation and consumption by a western audience.

A tourist attraction is also a social construction fundamentally based in the production of difference, the production of Otherness² (Sanchez and Perez 2016, 1). While it is true that the tourist attraction is also configured through the intervention of *local actors* (not only visitors) moved by its own interests (Lopez and Marin 2010, 11), it is the *etic* perspective of the western collective imagination that produces such Otherness. John Urry talks about the *etic* standpoint through the classic notion of “tourist gaze”. According to the *etic* standpoint, the tourist “reads” and interprets the destination according to a pre-conceived image of the place shaped by the dominant western

² In anthropology, the “construction” or “re-invention” of “the Other” refers to the cluster of cultural traits, usually derogatory, that the West has given to define foreign cultures (or social minorities). They are based on essentialist and evolutionary judgments about the cultural identity of the foreign group, mostly in opposition to their own identity.

discourse. Such discourse is produced by the advertisement industry, mass media, personal experiences, social relationships, and so on. Quoting Urry,

As tourists, we see objects constituted as signs. They stand for something else.

Some such signs function metaphorically (an English village can be read as representing the continuities and traditions of England from the Middle Ages) or metonymically (the substitution of some feature, effect, or cause of the phenomenon (such as lovers in Paris) for the phenomenon itself. (2011, 13)

Finally, this work is organized into four chapters. Chapter 1 develops the concept of therapeutic culture and contemporary attitudes toward health. Chapter 2 focuses on the conversion of non-western medicine into wellness and tourism services. Chapter 3 analyzes the figure of the indigenous healer in the mainstream imaginary of the wellness industry. It also elucidates how the western market translates and adapts non-conventional medicine, and introduces the debate on cultural appropriation, focusing on Mexico and the U.S. A brief case study for this discussion is presented in chapter 4, the touristification of *temazcales* (pre-Hispanic sweat-lodges) in the hotel industry of Mayan Riviera, Mexico. Final conclusion, a visual appendix and references end this work.

CHAPTER 1: SOCIO-CULTURAL FRAMEWORK: THERAPEUTIC CULTURE AND NEW UNDERSTANDINGS OF HEALTH

Since the beginning of the century, the concept of “therapeutic culture” (Wright 2008) has been widely addressed in the literature under different names, such as “therapeutic ethos” (Rakov 2013), “emotional capitalism” (Illouz 2008), or “affect” (Salamon 2003). The sociologist and expert on the topic, Katie Wright, describes therapeutic culture as the increased social influence of psychology, the growth of counseling and the preoccupation with the self’s internal life in the present western world (Wright 2008, 1). Indeed, all the previous terms refer to a western tendency, led by the popular culture or the entertainment industry, to insert psychology and psychotherapy into social relationships with the purpose of achieving self-fulfillment and happiness. At a macro level, this social “emotionalization” with a therapeutic drive manifests through the extension of 12-step programs, the vast production of self-help literature or the incorporation of mindfulness into the workplace. Entrepreneurs such as Oprah Winfrey have become some of the wealthiest individuals in the United States by using a therapeutic method of interview oriented to self-improvement. As demonstrated by Illouz in *Saving the Modern Soul*, “therapeutic narrative structures the mode of speech in a performative genre that (...), in the last fifteen years, has transformed the entire medium of TV, namely the television talk show” (Illouz 2008, 190).

The other key component of therapeutic culture is the importation of a range of foreign spiritual epistemologies with a psychological orientation in the west. Inversely, the social penetration of those philosophies has been made possible because of the fertile

soil that the therapeutic culture has produced. Buddhism is a prime example of this phenomenon. In his analysis, Franz Metcalf states “Buddhism has taken root in America exactly because it is so well suited to thrive in the laicized and psychologized environment of mainstream American culture” (Prebish and Baumann 2002, 353). He argues that the “Americanization” and “psychologization” of Buddhism, as well as the “buddhization” of psychology, are two parallel processes that contributed to the successful assimilation of Buddhism into western societies.

In order to understand where this phenomenon comes from, it is necessary to take a look at some developments in the 20th century. During the countercultural movements of the sixties, feminism popularized self-awareness groups based on a self-help narrative. Meanwhile, environmentalists defended an inherent link between health, nature and non-western medicines that set the foundation for the way we look at indigenous cultures today (Blazquez and Cornejo 2014, 4223). At the same time, humanistic psychology put into clinical practice the transcendence of the ego in pursuit of spiritual realization, and the expression of emotions to the detriment of the predominant *homo economicus* (Grogan 2013). Heavily inspired by humanistic studies, the nineties focused on positive psychology and the maximization of inner potential and wellbeing. Positive psychology studied “the strengths that enable individuals and communities to thrive” and was “founded on the belief that people want to lead meaningful and fulfilling lives, cultivate what is best within themselves and enhance their experiences of love, work and play” (“Positive Psychology Center” n.d.). This science has spread beyond academia to the public domain of popular culture, generating and feeding a market of happiness seeking. For instance, the campaign “Share a Coke with...” by Coca-Cola seeks “to create a more

personal relationship with consumers and inspire shared moments of happiness” (“Coca-Cola Australia”, n.d.). In Europe, the designs of “Mister Wonderful” started off “sending out positive messages through [the founders’] social network” (“Mr. Wonderful”, n.d.) and, now, their cheerful slogans on backpacks and coasters are internationally known. In a more political scope, as a growing science of happiness produces evidence-based research, government agendas have begun to include the objective of happier populations, notably the cases of the British Minister of Loneliness, created in 2018 (Yeginsu 2018) or the fellow Minister of State for Happiness and its National Programme for Happiness and Positivity in the United Arab Emirates (United Arab Emirates 2019).

The corporate culture has conducted its efforts on the matter as well. “Corporate spiritualism” (Heelas 2009), “spiritual capitalism” (Salamon and Ramstedt 2003), or “emotionalization of economic conduct” (Illouz 2008) is a new business orientation showing the interplay between health, spirituality and profit that characterizes the therapeutic culture. From Scientology training on how to do business and become a successful manager, to career or skill coaching, all have appropriated a self-development orientation to their business goals. “Cultivate resilience”, “increase kindness” or “manage strong emotions” are some examples. They reflect the psychologization of corporate success mixed with an applied spirituality borrowed from the New Age movement³

³ In her analysis *Definiciones de la New Age desde las Ciencias Sociales*, Carozzi (1993) addresses the New Age as a social and decentralized religious movement originated in the North American counterculture of the 1960s. It emerged to fight the ambitions of economic capital and geopolitics and rather adhered to human-centered philosophies inspired on indigenous values. Its principles advocated, in synthesis, for the need of reverting a corrupted society and the existence of a superior all-pervasive reality naturally interconnected with the individual. S/he would have to make contact with this reality in order to develop his/her full human potential. To achieve that goal, the New Age

(Salamon and Ramstedt, 2003). Corporate spiritualism shows how the therapeutic culture inevitably relies on a variety of spiritual epistemologies; however, the paradox here is that, far from promoting spiritual affiliation, it is the healing qualities of group meditation at work that is pursued to maximize profits by enhancing the working environment. Carrette and King (2004) summarize it eloquently when stating that New Age heritage today is “the food additive that makes neoliberalism more pleasant to the palate” (132 in Blazquez and Cornejo 2014, 4490; my translation). In synthesis, from emotionalizing marketing campaigns to the demand of soft skills at the workplace, therapeutic culture targets the intimate life.

One of the main traits of therapeutic culture is the development of new understandings of health. After World War II, the recently created World Health Organization (WHO) re-conceptualized the notion of “health” moving from a previous biological criterion to “a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity” (World Health Organization 1949, 1). In the decades that followed, public health in the West transitioned to health promotion strategies. It created a corpus of actions aimed to achieve two new goals: healthy life styles and enhanced wellbeing (Cornejo and Blazquez 2014, 4218-4236). Let’s explore each of them.

In 1985, WHO established the concept of “lifestyle diseases” to address social determinants of health from smoking to obesity. Under this new perspective, one’s health limitations were linked to undesirable individual decisions (Seeberg and Meinert 2015); inversely, individual healthier decisions would restore one’s lost health (or prevent

employed countless non-western healing practices from psychotherapy to astrology to Eastern medicine.

potential diseases). Thus, we can glimpse the beginnings of a well-settled contemporary narrative of the subject as victim, perpetrator, patient, and doctor of him/herself. Indeed, the higher the connection between lifestyle choices and health status, the greater the agency that patients acquired over their health management (Crivos 2007, 89). We cannot forget that, while this new orientation is developing in the mid-eighties, the western world is experiencing the speed of globalization, with an unprecedented access to health-related information, services and products⁴. Likewise, it is the beginning of the humanist tendency of the therapeutic culture, calling for awareness and action over one's own mental and spiritual health; in parallel, the subjectivity of how patients experience their body, disease, and healing efficacy is gaining legitimacy in healthcare and medical research (Cornejo and Blazquez 2014; Menendez 1992, 98). Therefore, when we talk about the impact of public health promoting healthy life-styles in this discussion, we want to consider it in context to understand the clear increase in self-care by the western patient. The self-help literature is the epitome of this health-seeking orientation. Books such as the bestseller *The Power of Now* visibly reproduce the mentioned narrative of subject as "victim-perpetrator-patient-doctor of himself" in our therapeutic culture: "We have to come to understand our role as the creator of our pain; our own mind causes our problems, not other people, not the world out there. It is our own mind, with its nearly constant stream of thoughts, thinking about the past, worrying about the future." (Tolle 2007, XIV)

⁴ Let's see the clear case of dietary supplements: their availability in the marketplace significantly widened after the release of the Dietary Supplement and Health Education Act (DSHEA) in 1994. This was a document actually elaborated for educational and regulation purposes of a growing manufacturing industry of dietary supplements. At the time of the DSHEA, 600 American dietary supplements manufacturers marketed about 4,000 products according to the Commission on Dietary Supplement Labels (1997 in National Institute of Health 2018).

Now, if we seek to understand the commodification of non-western medicine in the West, we first have to interiorize the commodification of health itself: Since the fifteenth century, the health field in the western world was controlled by the trained allopathic physician (Foucault, 1993). However, changes in the way to understand and treat health in the West, including the increase in self-care, have forced some transition of such monopoly from the specialist to the non-professional eye of the patient. Simultaneously, a market niche has risen to offer under-the-counter health products targeting self-care and wellbeing seeking. Thus, healthcare turns into a commodity and non-mainstream medicines are not born in the consultation of the western doctor, but in the marketplace.

As previously addressed, the idea of health started to evolve globally after World War II, arriving to “a state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity” (World Health Organization 1949, 1). Soon after, public health would tackle lifestyles. Additionally, that definition included the perception of health as a holistic entity, and the inclusion “well-being”, which would become the focus of an entirely new branch of healthcare. These two ideas have likely been the most influential in the formation of new health attitudes. Moreover, those two elements are repeatedly at the axis of this thesis.

First, the term “wellbeing” (or “well-being”) was included in healthcare to denote a state of good health, happiness, fulfillment, and purpose, judging one’s life positively and feeling engaged. The Center for Disease Control and Prevention (CDC) states that “wellbeing integrates mental health (mind) and physical health (body) resulting in more holistic approaches to disease prevention and health promotion” (CDC 2018). Second,

the principle of “holistic health” understands the individual as constituted by physical, mental, emotional, and spiritual realms, interconnected by a vital inner energy. Thus, health is the result of a harmonious relationship between the internal and the external experiences of the individual (Greenwood et al. 2015, 25-38). The concept of “holism” is not original from western countries, but an ancient principle central to indigenous, eastern and other non-western cultures. Within those, environment, living beings and invisible forces are interconnected and dependent of one another in an integrative web (Greenwood et al. 2015, 25-38). In 1960, the counterculture of the New Age embraced this life principle as a model for the humanistic and anti-capitalist society they were pursuing. Particularly, the New Age movement leaned on non-western holistic paradigms to respond to the harms of the biomedical hegemony. Some of the critics were a biological reductionism in the etiology and treatment of disease, an escalating consumption of drugs, and, more recently, a corporativization of the medical institution and an over-medicalization⁵ of society (Cornejo, Blazquez and Flores 2014, 4485-4518; Menendez 1992, 95-114). Alternatively, the New Age adhered to whole person-based therapies from psychedelic indigenous ceremonies to Ayurveda medicine, and advocated not only for their healing practices, but also, as I introduced, for their cosmologies and life-styles for their western societies. Furthermore, while mainstream-medicine received deep criticism by American scholars of the time (Menendez), today that discontentment has increased globally in the West, becoming a common reason for health seekers to undergo holistic treatments alone or simultaneously with western medicine. Scholars on

⁵ “Medicalization” of society is a term employed within the social sciences to refer to la forma en que el ámbito de la medicina moderna se ha expandido en los años recientes y ahora abarca muchos problemas que antes no eran considerados como entidades médicas y para los que la medicina no dispone de soluciones adecuadas ni eficaces. See Kishore J. 2002. *A dictionary of Public Health*. New Delhi: Century Publications.

the topic agree that the therapeutic eclecticism of the New Age during the sixties-eighties has impacted the western society of today as in no other time since those decades. Nonetheless, while back then those approaches were capitalist-resisting, their progressive absorption by the western market has turned them capitalist-supporting (Hunt 2005 in Heelas 2009, 199). Today, the plurality of understandings of health has developed in the form of consumerism, raising a millionaire industry of non-western medicines: the wellness industry.

CHAPTER 2: NON-WESTERN MEDICINE IN THE WELLNESS INDUSTRY

The difference between the terms “wellness” and “wellbeing” has not reached agreement either in the business or the academic fields. While “wellness” is commonly used for *physical* health (e.g., “wellness programs for weight loss”), the understanding of “wellbeing” is broader in scope (e.g., managing stress). However, since the industry that includes the two of them is popularly known as “wellness industry”, I will employ such denomination to refer to the market that offers *wellbeing* and *wellness* commodities.

The wellness industry is all-pervasive, incredibly successful and increasingly competitive. It includes “many sub-categories, such as health resorts, fitness, nutrition and beauty. The more clients demand a holistic focus to feel good, the higher is the pressure of the market forces for companies to expand beyond their one or two initial wellness sections” (Fernandez, Del Brio and Junquera 2008, 152; my translation). Also, providers use, and reproduce, the discourse of the therapeutic culture when they create a cause-effect between using their product and enhancing wellbeing.

Virgin Group from Sir Richard Branson has Virgin Life Care kiosks where people get “health miles” that they can use to buy products or services. Wall-Mart sells organic, and (...) [tourist complexes] plan to manufacture cosmetics, clothes and educational materials to orient costumers on how to have healthy habits and life styles. (152; my translation)

One of the most prolific arms of the wellness industry is the so-called Complementary and Alternative Medicines (CAM), coined that way by allopathic

medicine. Mostly of Eastern origin, the scope comprises all non-western approaches from mind-body therapies including Yoga or massage; natural products such as probiotics or Traditional Chinese Medicine's; and energy-based practices like Acupuncture or Reiki⁶. According to the National Center for Complementary and Integrative Health (NCCIH) (2017), CAM represents the therapeutic itineraries of individuals seeking emotional healing, stress management, relieve of pain, or simply satisfying their curiosity. Cortes (1997) also points at looking for spiritual and emotional capital through CAM. According to a 2012 national survey from the NCCIH (2019), more than 30 percent of American adults use CAM, generally in combination with allopathic medicine or/and other CAM (Bordes and Saizar 2014). In terms of the socio-economic landscape of this wellness industry, it is essentially created for and accessible to middle and high classes in capitalist societies.

The way non-western medicines are consumed as wellness and tourism commodities is marked by an epistemological pluralism both in society and in the way those therapies are packaged in the wellness sector. In studying the transformation of religion in the West, Ulrich Beck (2010) developed the analytical concept of “God of one's own”. He argued that the lower adherence of society to the Judeo-Christian tradition is not a result of a higher laicism, but of being in a “post-secular age”. That is a time marked by less social pressure to commit to a conventional religion (or related principles such as life-long marriage) in the West. Rather, Beck talks about open religious eclecticism at the individual level, of which the New Religious Movements

⁶ Extensive literature such as Joseph Alter's *Asian Medicine and Globalization* (2005) or Hauser's *Yoga Traveling: Bodily Practice in Transcultural Perspective* (2013) compile a variety of research on the globalization of Eastern healing.

would be a clear example. That framework helps us understand the segmentation of religion adherence and the *individualization* of spirituality in the way it is rationalized, sought and practiced. Likewise, we find not a decline of western medicine, but a hybridation and individualization in the way health is understood and pursued (after all, capitalism is foundationally individualistic). Additionally, the wellness market translates the epistemological aspects of non-western medicine as an individual experience with no spiritual commitments. The way non-western medicine is framed in the wellness industry is rooted in a religious and medical diversion from conventional hegemonic parameters to invite an epistemological pluralism where the therapy is often defined in terms of “experience”, and does not demand a philosophical affiliation. Thus, the post-secular society of “God of one’s own” incorporates a “*healing* of one’s own” that allows the market to maintain a wide market share. In the wellness industry, non-western medicines are presented as if they were a “buffet of alternative therapies” in which costumers fill their plates with tailored menus. The traditional “patient” walks simultaneous through the roles of patient, client, and, abroad, wellness tourist. With no need of pre- knowledge or post- commitment to the therapy, the patient/costumer embodies different epistemic and performative aspects of each of them, to which he gives a cohesive meaning within (Crivos, 2007, 89).

As much as wellbeing is gaining legitimacy by the medical science in influencing the health status, the West does not recognize foreign medicines as legitimate medical treatments comparable to allopathic medicine. The way the market packages wellbeing has less to do with a medical service than with a *recreational* activity, a form of pleasure or comfort for the self. We can clearly see this in the health tourism industry.

2.1. The wellness tourism sector

Tourism is one of the world's largest economic sectors, as well as one of the fastest in annual growth (World Tourism and Travel Council 2019). One of the protagonists of this development is health-seeking travelling, whose enormous level of specialization has made it an umbrella category comprising holistic, spiritual, spa or hospital tourisms (Alvarez-Garcia and Del Rio Rama 2016). Its most prosperous sub-categories are *wellness* and *medical* tourisms⁷.

The Global Wellness Institute (GWI) estimated that wellness tourism was a \$639 billion market worldwide two years ago (2018, III). It grew by 6.5 percent annually from 2015 to 2017, more than twice as fast as tourism overall (GWI 2018, III). Furthermore, international and domestic *wellness* tourists spend about 53% and 178% more than the typical tourist, respectively (GWI 2018, V). In fact, sector leaders such as Russia, Turkey or Mexico are investing millions of dollars in the development of their tourist attractions in the wellness industry (GWI 2018).

There are some factors that motivate westerners to engage in wellness tourism. Tourism has found a significant market opportunity in the desires for *keeping a healthy lifestyle* (Wellness Tourism Worldwide 2011). Also, *seeking holistic wellbeing* is at the center of tourist's decision-making (Global Wellness Institute 2018; Alvarez-Garcia and Del Rio Rama 2016; The Ostelea School of Tourism and Hospitality 2017). A 2010 survey asked consumers what they do to enhance their personal wellness, revealing that "take a vacation" was one of their top five activities (The Global Wellness Market 2018).

⁷ Note the difference: Medical tourism pursues biomedical-oriented diagnosis and treatments to solve health issues outside of the tourist's local place of residency. Whereas, wellness tourism is usually aimed at improving quality of life at a non-local destination, employs holistic approaches to achieve it, and sometimes it includes leisure activities (The Ostelea School of Tourism and Hospitality 2017).

Six years after, a significant survey on millennials across eight countries found that four in ten respondents situated “reducing stress” as the main reason for their most recent holiday (Expedia and Future Foundation 2016). Alvarez-Garcia and Del Rio Rama (2016) point out at the *world economic crisis* as an additional drive to pursue wellness tourism, as it would generate a “desire to slow down, to simplify, and to find meaning in life” (23). Lastly, from a demographic perspective, The Ostelea School of Tourism and Hospitality indicates that, while the wellness tourism industry used to target the senior population through the classic spa, today a new profile of consumers engages in wellness travelling seeking touristified non-western medicine: The millennial segment prefers holistic, non-western and beauty-oriented therapies, alongside with a complementary supply of locally immersive tourism, including language, culture and community experiences (2017, 19).

In the touristification of non-western healing traditions, the cases of Eastern and Caribbean-Latin American countries are the most evolved and, consequently, the most representative. In the Indian spa and wellbeing business, the “ashrams” are re-gaining popularity among the international tourism after being popularized in the sixties by the New Age movement. These isolated monasteries, originated in India, are occupied by many western tourists who spend a time period cultivating a monastic way of life based on the precepts of a founder guru. Locally and nationally, Central and Latin America are investing millions of dollars in the development of their wellness tourist infrastructure, and the expectations are definitely on the rise. Brazil, Argentina, and, heading the rank by far, Mexico, are the fastest-growing wellness tourism platforms. Each tourism ministry employs a different strategy to build the country’s tourism identity according to their

unique features. For example, Guatemala and Costa Rica are using their mineral springs and pristine landscapes to create a tourist menu around spa, gastronomic and eco-tourisms (that is, recreational and sport activities in wilderness) (PRWeb Newswire 2014)⁸.

Those tourism sub-sectors are not concentrated in the big metropolis anymore, such as Cancún or Mexico D.F. Rather, as Timothy and Conover point out, “non-traditional locations have begun to realize the lucrative potential of the nature and self-spiritualist market, and have started major promotional campaigns” (2006, 7). Thus, we can see the progressive industrialization and touristification of small indigenous communities where indigenous tourism (or even “volunteer tourism” promoted by NGOs) is emerging in hands of local cooperatives. The Lonely Planet observed

It should come as no surprise that the top wellness spots in Latin America have ancient roots. Renowned civilizations such as the Maya and Inca have long treated sweat lodges, hot stone massages and coca leaves as sacred parts of their culture. Drawing on these time-honored traditions, countries in Latin America have ushered in a new type of travel dedicated to finding inner calm (Waterson 2018).

Wellness tourism comprises a list as long as: holistic cuisine, body-mind-spirit regimes, local herbalist-based longevity programs, learning, adventure, spiritual enlightenment, or personal growth. However, the wellness industry branches rapidly like “Russian dolls”, so that sub-sectors that integrate spirituality, indigenous locations and

⁸ As a matter of fact, Costa Rica has recently expanded its national promotional slogan from “Pura Vida” to “Pura Vida *Wellness*” (my emphasis), as explained in Costa Rica News (Villegas 2017).

non-western healing overlap very often. This paper will synthesize the categories that employ non-western medicine under “holistic” and “ethnic” tourisms. The holistic tourist is the one who decides to turn inward to reconcile with his inner self through deep emotional and spiritual experiences. He/she may use non-western medicines through “yoga and spa treatments, shaman visits, metaphysics, tarot, nature hiking, reflexology, crystal healings, meditation, aromatherapy, etc.” (Timothy and Olsen 2006, 7).

Meanwhile, ethnic tourism emphasizes *the contact with the local community* to provide such non-western healing to the visitor (but the holistic tourist may achieve his purpose either through the local medicines of the place or not) (SECTUR 2004 in Morales 2008, 126). Within the two categories, we find the following sub-types.

Spa tourism: In the present century, India, Morocco, South Africa, Mexico and Costa Rica, among others, have conceptualized new versions of spa that underline their indigenous healing traditions, cultural idiosyncrasies and unique environments (such as local dancing or yoga). Their narrative and treatments carry a spiritual *leitmotiv* that combines the New Age with the cosmology and health practices of the native culture(s) (Alter 2005). The spa market in Central America is one of its strongest tourism resources. Lately, it is investing in the concept of jungle or eco spas, where visitors interested in indigenous culture can undertake a spiritual cleansing against a backdrop of pristine nature (such is the case addressed in my ethnography in chapter 4) (Global Wellness Institute 2018; Harrison, 2013).

New Age tourism is conducted in locations popularly known for having high healing potential and mysticism (including Sedona, Glastonbury, and Machu Picchu) (Timothy and Conover 2006). This tendency has generated a market of healers, gurus and

mystics who offer a service of non-western therapies usually related to the healing traditions of the site. Most of them are New Age supporters, employ a New Age discourse, and are non-native to the healing practices they use but often migrated from other regions.

Psychedelic tourism includes travelling to a setting where an indigenous community has traditionally used local plants with hallucinogenic effects as part of their medical models or with social or spiritual purposes. When touristified, these ceremonies are usually re-constructed in what is understood as the “traditional way” for the tourist to experience an internal healing-based transformation through the guidance of a local healer. Also, it is especially at this point where the principles of capitalism and the principles of indigenous unity enter in conflict. For Ayahuasca Travels, an agency specialized in psychedelic ceremonies with local plants in the Amazon, their trips are “for people who want to find and discover the best perspective of themselves. It is for those who value deep inner evolution work more than the simple adventure or the distractions offered by visiting beautiful sites.” (n.d)

Lastly, in indigenous tourism it is the native group who designs and manages the tourist services offered in their community (Morales 2008). The village Huautla de Jimenez, in Oaxaca, Mexico is a clear example of this type. During the sixties and seventies, the medicine woman Maria Sabina became very in demand in Huautla by personalities sympathetic to the New Age movement, who wanted to be guided through hallucinogenic mushrooms intakes by this healer. After Sabina died, the town has transformed into a mythic town where her descendants and many others that claim to be

so have set up an entire platform of mushrooms ceremonies. The Ministry of Tourism of Mexico encourages travelers to visit Huatla:

In order to remember the practices and prayers of Maria Sabina, you may want to meet and go into in the life of the 13th Mazatecan shaman known as Mamá Julieta Casimiro. Stay at her healing accommodation in the heart of the Mazatecan Sierra, where you will be able to pray and heal your soul, as well as get to know the indigenous ways of live and pray. (VisitMexico, n.d.; my translation)

In conclusion, big and small settings, specially less-industrialized regions of the world, are being much exploited as wellness-holistic destinations where an upper/middle-class tourist often inspired by anti-capitalist ideals have a contact with non-mainstream views and healing “from the source”.

→ The Marketing Discourse of the Wellbeing

The marketing discourse of wellbeing is based on a spiritual-loaded lexicon borrowed from the New Age that serves to market non-western medicines. Originally, some of that language belonged to the specialized fields of mental health clinical practice, but in today’s context it has de-specialized to become part of the marketing of wellbeing and popular jargon. Key terms including “harmony”, “balance”, “energy”, “to flow”, “integral”, “to be connected”, “personal development”, “to overcome [emotional] limitations”, “to treat disease as a master”, “to change one’s *karma*” (patters, habits), “healing”, “to return to the inner self”, or “true self” (Heelas and Woodhead 2008, 26 in Blazquez and Cornejo 2014, 4230). The following is the description of a spa-resort in the Mexican coast (my italics emphasize the lexicon that belongs to the wellbeing discourse):

Join us for a *purification* and *healing* ceremony hosted by Yäan's Mayan healer on the Moon cycles. You will *cleanse* and deeply heal as you are lead through the 4 doors of our pre-Hispanic Sweat lodge Ceremony. Upon leaving the Temazcal the sensation has been described as a *re-birth* experience, *re-uniting* in the same world with a clearer *vision* and *inner peace*. (Yaan Wellness Energy-Healing-Spa, n.d.)

When a non-western therapy is presented under those terms or *ideas*, the costumer associates that treatment to something wellbeing-producer. In this way, the wellbeing discourse is a marketing strategy in the commodification of non-mainstream medicine, and tells the costumer the storyline of the therapeutic culture.

CHAPTER 3: IMAGINING “THE HEALER” AND PRODUCING CULTURAL HYBRIDS

How does it look a westernized healing that carries new identity markers yet keeps some of its culture of origin's? Which role does the western image of “the indigenous healer” play in creating and maintaining this healing industry?

3.1. Processes of translation to the western market

When incorporated to the market, non-western medicines are translated to become culturally meaningful, as well as to adapt to the market forces to success as capitalist commodities. That translation may be conscious or unconscious, and occurs at micro and macro levels. For instance, the way someone from the U.S. will cognitively incorporate the Japanese hands-on energy healing reiki will be interceded by:

1. *Structural factors*, including, (a) the cultural dominant discourse around reiki, constructed by media, biomedical reports, etcetera, (b) associated imaginaries on Japan, and (c) other processes of enculturation that educated her in the cultural worldview of her place of origin.

2. *Individual factors*, including (a) her personal experience(s) with reiki, (b) her (dis)likes, and (c) her religious, spiritual or ideological affiliations and further beliefs.

Also, even before those actors go into action, reiki already went through social, cultural and economic routes of translation to be able to success in the market of United States; that is, there is a process of transculturation that has discriminated which elements of reiki will remain in its American versions as well as the way they will be expressed: What will be emphasized about the practice? How it will be advertised? Which

imaginaries will be linked to it? What does it require from the patient? What is its mechanism of action? Who will perform it? In translation and adaptation, reiki undertakes a clear process of “mimesis” of the biomedical standards when practiced in the wellness industry and the Public Health system (McClean 2003). Reiki’s therapeutic consists of channeling the universe life force toward the energetic body of the patient through the practitioner’s hands. Traditionally, a reiki master orally instructs an apprentice who will perform reiki as a non-lucrative service. In the majority of its western expressions, reiki defines its mechanism of action with the theory of quantum physics, emits graduation diplomas to its students, and it is taught by nursing professionals. As a matter of fact, its imitation strategies of the biomedical model aimed to get its legal status regulated and to increase its legitimacy in the western healthcare system.

The western-hybrid yoga has experimented other types of changes. In the Merriam Webster dictionary, yoga is:

1: A Hindu theistic philosophy teaching the suppression of all activity of body, mind, and will in order that the self may realize its distinction from them and attain liberation.

2: A system of physical postures, breathing techniques, and sometimes meditation derived from Yoga but often practiced independently especially in Western cultures to promote physical and emotional well-being. (Merriam-Webster, n.d.)

The “westernized” yoga in entry 2 shows a clear difference with the way yoga in entry 1 expresses itself in the native context where it does not have a capitalist value.

When most people in the west think of “yoga”, a tricky body pose in a sequence of other tricky body poses performed by a group class comes to mind. However, that is the translation of the Yoga Sutras (ancient yoga texts) crafted by the western market. Moreover, the western one is a secular practice. Meanwhile, the autochthonous yoga is Hindu, as well as a universe-integrating philosophy, a life-style with precepts over what to practice and to avoid, and a moral system: the physical exercise in the native yoga is not a goal per se, but the means in a long line of steps to prepare the body for the control of the mind or “meditation”. Whereas, meditation pursues setting boundaries to thoughts of impure actions such as sex, excesses, and any other thought that interferes with the final goal of yoga: the union with Brahman, the superior force of the universe⁹. The yoga in the wellness industry is both a workout to alleviate physical and mental complains, and a vehicle to get in touch with one’s personal spirituality (to establish connection with the “God of one’s own”, by pursuing the “healing of one’s own”).

On a different matter, the process of translating and adapting non-western healing in the tourism industry is paradoxical. When commodified, non-western medicines negotiate their identity between *localized* and *global* commodities (Cid, Carrasco y Fernandez 2019). This phenomenon is called glocalization, that is, as a result of cultural globalization, the local adapts to the global, and the global to the local, creating singularity and homogeneity at once (Ayora Diaz 2010; Aguilar Criado 2005). In that way, each tourist healing product is subjected to a standardization to be able to be exchanged. Furthermore, the translation of non-conventional healing occurs in a fine line

⁹ The specifics to what falls under impure actions and excesses in the Yoga philosophy may varied according to the sub-traditions of the practice, yet sexual engagement or drinking alcohol are for certain contemplated in one of the oldest forms known of Yoga, Yoga Vedanta.

between keeping it *exotic enough* to show its nature and elicit curiosity, but *familiar enough* to be accessible for the consumer and meet with the global tourist imaginaries (Long 2016).

The ethnographic case of the Mayan village Ek Balam, Yucatan, Mexico, is an example of how Mayan locals turn themselves into hybrid products of their cultural origins and the recreated ethnicity that they play for the tours in their village. Rodriguez Martinez (2017) describes that each Mayan family exhibits the use of the “metate”, a traditional pre-Hispanic ground stone tool used for processing grain and seeds, as part of their daily cooking; however, in reality, they grind their corn in an electrical mill in downtown. Likewise, the author explains that, during a visit to a local’s crop field, the Mayan farmer emphasized his catholic faith in front of an altar with a catholic cross set in the soil. He explained, in Mayan, his prayers to the cross for the rain to come. Before translating the explanation to the group, the tour guide asked the farmer if he meant that he prays to Chac, the Mayan Rain God, to what he insisted that the cross symbolized Christ, “the faith of the Catholics” (Rodriguez Martinez 2017, 127; my translation). When the guide headed to the tourists, he indicated: “In this altar, Mr. Ruperto lights up a fire and offer some beverages to honor God Chac, the Rain God. (...) As everyone can see, there is the cross, so there is a relation between Christian and Mayan beliefs, yet what is fundamental for them is to pray to the Rain God” (2017, 127; my translation). The recreation of the Mayan identity takes us directly to the next section.

3.2. Creating the healer in the western imaginary: The Noble Savage

The construction of the Other between groups of the same or separate societies

has been a constant across history. In the multiple encounters between Europeans and non-western civilizations, the formers have repeatedly defined the identity of the latter in opposition and, often, subordination, to their own.

In the imaginary of the European colonization, the autochthonous was constructed as uncivilized, irrational, and wicked (and treated accordingly). During colonial times, those representations have justified the political, religious, scientific or economic aspirations of the new settlers; yet the derogative understanding of the indigenous Other has persisted ever since. From a perspective of pursuing progress and industrial prosperity, indigenous peoples of the Americas have constantly been perceived as a burden for national and federal governments. Because of that, natural and social science supported assimilation policies during the nineteenth-century and explained the impoverishment of the natives in terms of intellectual and racial inferiority. Still, particularly in Mexico, a pride in the wealth of pre-Columbus civilizations started operating in the education of Mexican *mestizos*, who would be taught to be their descendants (but not the descendants of the current indigenous peoples), as explained by the Comisión de Desarrollo Indígena de México (Navarrete Linares 2008, 15). While the native of the nineteenth and twentieth centuries was discriminated against colonial-inherited depictions, the pre-Hispanic empires were admired based on a contrasting imaginary on their splendor. This dichotomy persisted today in the collective imagination of non-native Mexicans about their indigenous populations (Navarrete Linares 2008).

In reference to Native Americans in the U.S., Phillip Deloria (1994) points out in his dissertation *Playing Indian* that Native Americans have been depicted as, and sought for, incarnating ideals such as classic republicanism, anti-modernism (attributed by the

romantic stream in literature), or anti-capitalist ways of life (attributed by the New Age). Those given identity traits were mimicked or appropriated by groups of the U.S. who found in Native Americans answers to different aspirations (Deloria 1994).

During the second half of the twentieth century, the indigenous Other was “discovered” to have culture (Sahlins 1995, 378 in Hall and Tucker 2004, 68). This contributed to switch his image from uncivilized to rational. Following up, the political and civil rights movements fought by indigenous and non-white nations of the Americas triggered an activist mainstream aimed at de-colonizing the old image of the indigenous (Mignolo 2009). As a result of all those events, the national and international community of the end of the century recognized the historical genocides perpetrated to indigenous peoples, and started developing frameworks to better protect their rights and identities (United Nations n.d.).

In the meanwhile, the New Age movement of the seventies through the eighties was crafting a new image of the indigenous Other based on the concept of the Noble Savage. This is a centuries-old western myth that portrayed non-European peoples with an elevated purity, exempted of sin as devoid of moral knowledge (Ellington 2001)¹⁰. The New Age Noble Savage acquired additional traits as a member of a gender-egalitarian community, in harmony with nature, inhabiting a paradise far away from the influence of the West (Ayora Diaz 2002). Within this narrative, the idea “the healer” was introduced as a source of original wisdom about humankind and the universe; a wizard; the owner of a mystic relation with spiritual forces, inexplicable by western science,

¹⁰ Note that the two opposite representations of the Indigenous Other (the colonial and the noble ones) coexisted together during a number of centuries; however, while the negative depiction was the predominant in the west’s imaginary, the positive spread across literature and intellectual streams.

which the healer would invoke to channel healing powers over others (Gonzales 2017). The imaginary of the indigenusness was looked up as an inspirational model to the faults of the capitalist system of that time. With the beginning of the twenty-first century, the binomial “therapeutic culture-wellness tourism” rescued the New Age image on the indigenous Other, transferred it to the collective consciousness, and turned it into a commercial brand: Holistic tourism, shamanism, or even Complementary and Alternative Medicine are doors to an authentic truth that today’s western traveler longs for (Aldred 2000, 342).

The term “shaman” is a recurrent element of the “indigenusness” merchandising. Worldwide healers are known as shamans in mainstream culture since that name was used by anthropologists to refer to the medicine people of a Siberian tribe. Phonetically, their name spelled “shamans” in their native language, as explained by Beck and Walter (2016, 102 in Gonzales 2017). Rather than distinguishing among culturally distinctive healers around the world, there is an homogeneization of healers under the Siberian term into one single category.

One of the most agreed explanations to the romantization of the healer comes from the concept *nostalgia*, that is, the idealization of a past freed from the dissatisfactions of the present (Steward 1989; Ayora-Diaz 2002). Some postmodern approaches to nostalgia anchor in the liquidity aspect of contemporary western society, ruled by the constant birth and death of ideas, practices and peoples (Bauman 2013). They also point at the lower commitment to traditional institutions, as previously discussed (Ayora-Diaz 2002; Sanchez and Perez 2016, 522). Those situations would have stolen a sense of stability and certainty for the western inhabitant. Also, contemporary

New Agers would look at the Noble Savage for reasons as the one observed by the Native American Rayna Green:

Members of the women's movement in America, and those who are active in these new age religion groups very much want to find a model of matriarchal societies. (...) This is generally overstated. Even in the Iroquois system, which had a very strong matrilineal focus, there were checks and balances in that both men and women had their own spears of authority. (Smith 1994)

For Native American Lisa Aldred (2000), nostalgia affects American Indians healers too, as they would simulate the 'original Native American spirituality' out of nostalgic for an absent 'authentic' spirituality, and consume it (343).

Western re-construction of indigenous' identities has a number of (other) problematic implications. First, the represented is deprived of his capacity of self-representation; second, staging their cultures hides the real history, contemporary struggles, and culture of the community (Fotiou 2016; Feldman 2011). In creating and reproducing the indigenous stereotype, tourism chunks reality in pieces and exhibits those parts that are coherent with such depiction. This is an ongoing complain of Native Nations of the U.S. In the documentary *Sweating Indian Style: Conflicts Over Native American Ritual* by Susan Smith (1994), the Native American Joallyn Archambault explains

People think that they have tapped into the real thing. But the real thing has 300 different versions and it's only one version they gravitate toward. It is the version that haunted their grandparents and the version that haunts us now. It is an Indian that doesn't exist. (Smith 1994)

Lastly, the recreated indigenous not only obscures native peoples' political struggles and multi-level discrimination. In the tourist pursue of cultural pristineness, it omits that they are actually the result of a lifetime and ongoing hybridation with other communities (Ayora 2014).

3.3. On indigenous knowledge and cultural appropriation: A focus on Mexico and the United States

At different times, groups of the international indigenous community have reiterated their opposition to western cultural appropriation of their heritage. In this discussion, cultural appropriation is used as the act by a non-indigenous person (in most of the cases) of taking a traditional cultural expression from an indigenous culture, and either self-attributing its ownership or repurposing in a different context, without authorization or acknowledgement in a way that causes harm to the traditional cultural expression holder(s), as understood by them¹¹. In 2007, in the frame of the United Nations, representatives of indigenous groups worldwide produced a statement on their viewpoint about western appropriation of their cultures. This became The U.N. Declaration on the Rights of Indigenous Peoples, which delineates and defines their individual and collective rights, including their ownership rights to cultural and ceremonial expression, identity, language, employment, health, education and other issues. However, in the practice, the respect for native sacredness or special rights is clashing, with constitutional statements on individual rights (such as the Religion Freedom Statement of 1989). Non-natives that perform spiritual or recreational activities

¹¹ Definition inspired in the one provided by the World Intellectual Property Organization (WIPO): See Vezina, Brigitte. 2019. "Curbing cultural appropriation in the fashion industry with intellectual property." WIPO Magazine. Accessed at https://www.wipo.int/wipo_magazine/en/2019/04/article_0002.html

in sites that are sacred for Indians defend their right to use that land too, in the frame of the current legislation on what is federal and not Indian land. Pointing at Indian sacred mountains, rock climbers argue “this is my church too”¹². Likewise, non-native young generations performing Native American-inspired meditations in ceremonial land for Indians claim that, precisely because they recognize the holy character of the site, they are there simply to honor it. Other non-native appropriations would include skiing, the so-called plastic shamans, mining or construction work. While the land expropriation and environmental damage would serve for an entire aside discussion, they are part of the complaints of Native Americans emphasizing the draining of their water, disturbance of their peace and livelihood or the sporadic adherence to their spiritual beliefs: “They come here for self-indulgence, to fill the voids of a [white] culture that is in spiritual bankruptcy” (McLeod 2001).

Native Americans have spoken against the misuse of indigenous healing epistemic and practice. They denounce the presence of “plastic shamans”, referred as non-native individuals that use American Indian traditional healing *without the permission and acknowledgement* of Native Nations of the U.S., but *self-identified* as medicine men and woman (Lisa Aldred 2000; Macy and Hart 1996). For the Salish and Kootenai Nations, those who have not been raised and taught within the Native community “cannot understand in months, or years, a worldview that has been passed to our elders from their ancestors over thousands of years” (Smith 1994). That knowledge, furthermore, has to come from vision quests and dreams, as pointed out by the Macehua

¹² Quote gathered from the interview to a climber of Devils Tower, Wyoming, displayed in the documentary *In Light of Reverence*, by Christopher McLeod, released in 2001. See references section for complete information.

Cazarez family in Morelos, Mexico (Cazarez et al. 2018). No learning outside the native communities' elders would provide the same depth of spirituality and manifestation of ancestral powers: "This learning is through tradition and oral transmission" (Cazarez et al. 2018, 17). In addition, many Native Americans have repeatedly stated that obtaining profit from healing is disrespecting the very essence of it: "[Since] the person wants to get what they paid for, the Spirit Grandfathers will not be there", declared Chief Arvol Looking Horse (2009) during a statement against the misuse of their ceremonies motivated by the recent deaths in a non-native sweat lodge in Arizona¹³. On the other end of the spectrum, western healers argue that although some elements of their ceremonies are similar to American Indians', they are just practicing what resonates with them in a natural environment: "We are not white people trying to be Native Americans" (Smith 1994), and declare that they do not profit from their rituals, yet they have to cover the expenses that they generate (Smith 1994).

An important consideration in the commodification of indigenous heritage is how much control the cultural descendants have over the use and ownership of their heritage. This is a turning point that differentiates indigenous communities in Mexico from their neighbor Native American nations in the U.S. On one hand, the boundaries of Native American communities are defined by indigenous reservation. This essential concession has facilitated the continuation of their cultures within the limits of their territory and peoples. Each Nation is self-determinant over keeping their non-western institutions for

¹³ The case of several deaths during a non-native imitation of a Lakota sweat lodge in Sedona, Arizona, was strongly contested in the media by the Lakota people, who clarified their lack of involvement with western versions of their sacred rite inikag'a (known as "sweat lodge" in English), as well as declared that not having earned the right to lead the inikag'a is a "spiritual genocide" for their people (Looking Horse 2009).

their own use, as well as over how much contact they want to establish with the non-native society. Certainly, these concessions have limits and they deal with their own issues but, overall, the scenario described have given Native Americans a sustained cohesion and have favored their political organization. Also, the U.S. is politically very aware of the historical genocide perpetrated over Natives, so all together have converged into specific policies for Native American heritage protection, including environmental and knowledge-based aspects.

The situation for the indigenous peoples of Mexico is very different. Mexico does not have a comprehensive method of establishing indigenous self-managed areas, such as protected sites for ceremonial use (e.g., Real de Catorce, San Luis Potosi), neither has granted the country a plurinational character for its indigenous lineages, which removes many opportunities of indigenous self-determination. Not-on-sale legislation to protect native heritage from outside appropriations is still absent; as a matter of fact, a solid democratization process for indigenous Mexicans just occurred few decades ago in the twentieth century (Stavenhagen 1997). In addition, if compared to the U.S., indigenous individuals are less politically organized.

Nonetheless, in light of the severe level of impoverishment of its indigenous and rural communities, the Mexican government has been protecting indigenous communities (including their cultural legacy) through *development* programs across its indigenous geography. As I will further discuss in next section, one strategy of these programs is to insert their unique cultural assets into the tourism market with the purpose of generating local employment, investments, and more infrastructure for indigenous inhabitants of those destinations. Moreover, the recent neo-liberalist policy in Mexico is welcoming the

settlement of foreign capital in the tourism sector in the country, yet it does not have solid regulations on potential environmental or cultural violations over indigenous peoples.

Building upon the work of the Macehua Ramirez Cazarez family and the Native American and professor Patrisia Gonzales (Ramirez Cazarez et al. 2018), without stronger boundaries adapted to present times of limitless cultural globalization and native healing consumerism, indigenous medicines are inevitably exposed to the loss of structures of accountability on medicinal knowledge and praxis. Access to Indigenous Knowledge (IK) is being transferred to non-native sources such as the wellness industry or the mass media produced by the therapeutic culture in the West. With that transfer, hybridation is emerging. Although this dynamic is not inherently negative, and in fact is creating different opportunities and creative responses, it is also true that is entailing the displacement of healing traditional authority (Ramirez Cazarez et al. 2018). New frames of learning and/or practicing traditional medicine risk the engagement of the *elder*, indigenous teacher of the apprentice to healer within structures of oral knowledge and accumulated experience (Cazarez et al. 2018, 40). Healing consumerism in tourist contexts calls to the emergence of profit-driven healers and facilitates the misinterpretation of native healing and its efficacy, therefore jeopardizing the continuation of its essence: “Practicing the medicine correctly will serve to protect it”, states the daughter in the Cazarez family (Ramirez Cazarez et al 2018, 49). For the reasons explained, Mexico has a much more vulnerable scenario to the commodification of indigenous markers than the one presented in the U.S.

→ The case of medicinal heritage’s revitalization in Mexico

Heritagization is understood as the governmental initiatives to revitalize and give a utilitarian use to the cultural heritage of a country. Mexico is on the top of these moves. The country is designing political projects aimed at increasing the value of its native medicines and *curanderos*. Nevertheless, I argue that the heritagization initiatives are mostly focused to import tourism income into the country, concentrated in few hands, and not as a *collateral* effect of those projects, as the Ministry of Culture in Mexico would point out (CONACULTA, 2004).

In the state of Oaxaca, the first intercultural hospital pairing western and indigenous treatments was actually funded by the national Ministry of Tourism. In fact, most of its patients happen to be foreigners¹⁴.

The Regional Center for the Development of Mayan Medicine (CEDEMM) is another example. The Center contains various sections including medicinal gardens, healing rooms, and the Museum of Mayan Medicine. According to the ethnographic observations of the Mexican Fernandez Suarez (2004), the CEDEMM is really set up for tourist tours that exploit the exotization of the Mayan (236). On the same topic, Ayora-Diaz (2000) had previously highlighted that “the *ladinos* or *mestizos* working for (...) [CEDEMM] have recreated an imaginary which is based on a romantic, nostalgic view of indigenous life” (179). As a matter of fact, online search of the CEDEMM did only show me results on the Museum, including its own website (which the CEDEMM does not have), and none about past or ongoing initiatives of the Regional Center.

¹⁴ Data obtained through a local informant, Oliver Froehling, activist and scholar in Oaxaca de Juárez, on March 7, 2019, during an interview in the capital of the Oaxacan state.

While a government-managed center for the “Development of Mayan Medicine” would be expected to be dynamic in the revitalization of cultural heritage, its functioning rather suggests the promotion of a tourist attraction for ethnic tourism. As it occurs with the Oaxacan intercultural hospital, Fernandez Suarez (2004) underlines that, specifically, the native pharmacy of the CEDEMM, does not attract local costumers either, so an inevitable question arises: is it possible that the heritagization efforts are actually touristification endeavors? And, if so, what is it in the touristified result that makes locals not participating of it?

CHAPTER 4: CASE STUDY: THE PRE-HISPANIC *TEMAZCAL* IN THE TOURISM INDUSTRY OF TULUM, MEXICO

4.1. Introduction

In this closing chapter, I present my original research and apply the concepts discussed in the previous chapters on the commodification of non-western medicine to the specific case of the Mexican sweat lodge or *temazcal*. The research goal was to analyze the transformations experienced by this pre-Hispanic practice throughout its conversion into a tourist service in the wellness destination of Tulum, Mexico. To do so, this project asked which reinterpretations and adaptations of the *temazcal* shape its identity and function in the spa industry of Tulum? Particularly, how it is marketed within the therapeutic menus of the hotels? In which ways is it understood and performed by *temazcal* guides in those settings? Which new meanings does the *temazcal* carry for the tourists that attend it?

To answer those questions, I spent six weeks, July through August 2018, in the town of Tulum, Quintana Roo, Mexico. Three core spas on the coastline and one in town were researched: Ahau, Azulik, Maya Tulum; and Holistika, respectively. I conducted participant observation during four *temazcal* ceremonies, including a local *temazcal* to compare those in the hotels with one not for tourists. I collected seventeen interviews, composed by four hotel managers (one for each of the hotels in the study), one worker of costumer service at hotel Ahau, five *temazcal* guides or *temazcaleros/as* employed by those hotels, and seven tourists that participated with me in the ceremonies. Additionally, I pursued an online certification in “Mexican Traditional Medicine and Nahuatl

Temazcal” (my translation) guided by the Mexican school Tlahui-Educa, which included online correspondence with the head of the school on the present topic. Prior to arrive to field, I did not know any of my interviewees, except for a brief email correspondence with hotels and one temazcalera that I found through a social network, in which they agreed to participate in my project. Once I attended to temazcal ceremonies in Tulum, I was able to introduce myself to the rest of actors of this research.

The contribution of this project lies in an analysis of the main actors involved that tries to represent equally all of them: Most of the scholarly production with similar goals either lacks the voice of the local people of a tourist destination or does include it but leaves out the perspectives of the tourist businesses of the site. This research, in particular misses direct interviews with the Mayan community of Tulum; however, it gathers information on them collected from interviewees that works or have lived with them.

Lastly, I chose to focus on Tulum and the medicine of temazcales because of the numerous initiatives in Mexico to touristify indigenous heritage. From visits for the Day of the Death, to gastronomy routes on pre-colonial dishes, to new indigenous cooperatives providing cultural immersions within their communities, Mexico is in a process of heritization of its indigenous identities (Olivares 2017). Its wellness tourism sector is one of the most developed pieces of the Mexican tourism infrastructure (alongside with medical traveling), and advances well ahead of its American neighbors. Within the hotel-spa sector, temazcales are at the top of the successful pre-Hispanic additions to the authentic and cultural supplies of those wellness menus. That said, it is well known that Mayan Riviera, Quintana Roo, stands out as the most prosperous wellness destination in the country (SEDETUR, 2017). Within, the town of Tulum had

the type of holistic-New Age profile that would reflect the accommodation of non-western medicine to the market and costumer described throughout this paper. For all the reasons above, I decided to head to the hotels alongside the Tulumian coast to research the commodification of temazcales.

→ Native healing and the Mexican Ministry of Tourism

Over the last decade there have been a boom in the commodification of indigenous healing practices in Mexico. Today we can find indigenous cooperatives opening up ethnic museums for visitors, as well as towns earning their livings by guiding ceremonies with endogenous hallucinogenic plants (e.g., San Luis Potosi or Huautla de Jimenez). In politics, the Ministry of Tourism (SECTUR) is using native medicine as a tourist claim in the wellness industry. Its official site is an evident example: The section “tourism of health and welfare” encompasses temazcales, mushrooms ceremonies, smoke-cleansings, spa services as ichthyotherapy, cultural immersions to the Tarahumara Holy Week, and the so-called “indigenous paradises”, which I argue it is an invocation of the idealized unspoilt Other in harmony with his environment (Consejo de Promoción Turística de México, n.d.). As a matter of fact, the Secretary of Culture of Mexico endorses the intangible Mexican heritage “as a resource of income and collective wellbeing” (2008, 56). In promoting pre-Hispanic heritage, SECTUR developed the successful brand *Pueblos Mágicos* (Magic Towns), which currently includes 83 locations. *Pueblos Mágicos* targets visitors to small communities, which preserve architectural and cultural features of Mexico’s colonial towns. As to medical heritage, Mexico is pioneer within the Caribbean-Latin America in incorporating indigenous medicines to its wellness tourism infrastructures (Global Wellness Institute 2018, Rojas n.d.).

The reasons behind the touristification of native medicine in Mexico lie in a web of interrelated factors. First, we encounter the globalization of the therapeutic culture, wellness industry, and mass tourism. Second, the investments on national tourism and tourism segmentation are playing a key role (Plan Subregional del Fondo Nacional de Turismo 2000 in Fraga, Khafash and Córdoba Ordoñez 2015, 60). Third, as introduced earlier, policies aimed to protect intangible heritage and to foster rural development commodify territories and cultural identities (CONACULTA, 2004). For instance, indigenous art and medicine are given a *tourist value* to create economic revenue for the local population. Fourth, there is a rebirth and re-creation of native medicine carried out by neo-Mexicanists and further actors, as will be examined in next section. Influences of minor impact include rural exodus to urban environments in the Mexican eighties, which contributed to the insertion of *mestizo* medicines into the urban market (Codigo CDMX n.d.).

→ The temazcal

Temazcal, *temascal*, or *temescal* is a type of sweat lodge original from pre-Hispanic ethnicities in Mexico and Northern Guatemala, including Mayans, Zapotecs, Mixtecs or Totonacs, among others. Although sweat lodges have been part of the bathing traditions of cultures from North Europe, to Middle East to the Americas, in these lines I will focus on the ones practiced within Mexico. At the time of the first contact between Europeans and Mexican autochthonous, conquistadors named the lodge after the Nahuatl version *temazcalli*, from *tema*, “steam bath”, and *calli*, “house” (Rojas Alba 2012a, 2; Aparicio Mena 2006, 4) (fig. 1). According to the Mexican doctor and temazcales

researcher Mario Rojas Alba (2012a) Nahuatl's was the civilization that most used and, possibly, first disseminated the bath (2).

Generally, the temazcal is a short structure, rectangular or circular, made of stone, adobe, or any solid skeleton covered by fabrics. The interior, in darkness, has one or two covered accesses and a cleavage to place heated volcanic rocks from a nearby bonfire. Once the rocks are in, plain water or mixed with medicinal herbs is poured over the stones at different times, releasing hot steam that creates a sauna effect for the individuals sitting inside (Aparicio, 2006).

Following the categorization of Rojas Alba (2012b), there are three main types of temazcales: therapeutic, cleansing and ritual. The therapeutic temazcal is aimed at treating many different afflictions within the frame of Mexican *mestizo* medicine (a hybrid between pre- and post-colonial medicine), which may include the breathing, digestive, musculoskeletal and nervous systems. Scholars agree that using the lodge for childbirth was common across the indigenous groups of Mexico (Sahagún 1975; Redfield 1930; Aparicio 2006; Rojas Alba 2012b). The Spanish missionary Bernardino de Sahagún, collector of cultural identities of Mexico during colonialism, narrated how Mexican midwives massaged women in labor inside a working lodge to facilitate delivery. Afterwards, they purified mother and newborn from spiritual and physical afflictions that they may carried with them (Sahagún 1975, 688). Today, this particular use is still active within rural communities, mainly in family units whose temazcales are shared with the community, as I could experience during my first temazcales in non-urban environments (Aripze 2009, 201; Redfield 1930, 34). The second type, the cleansing temazcal, is closely connected to the therapeutic use of it. It was, and still is,

common that families construct a sweat lodge in their properties to undergo baths for relaxation, cleansing, or ailment treatment every week or every other week (Arizpe, 2009; Aparicio, 2006). Quoting the descriptions of Cresson (1938), “an important part of the bath is the washing with hot water and soap, used with bunches of maguey fiber or pieces of dried grass” (98). Factors such as rural exodus and the adherence to biomedical ways in rural Mexico have diminished the therapeutic practice of *temazcales* by *curanderas* in favor of the cleansing use (Arizpe, 2009). Third, the ritual *temazcal* has much less scientific evidence. Remains of lodges in pre-Hispanic ceremonial nucleus, Mayan ballgame’s courts, and collected oral data have pointed to purification purposes, such a blessing newborns, or have situated the lodge as a place for decision making among community leaders (Alcina Franch et al. 1980; Rojas Alba 2012b, 4).

Prior to the Spanish conquest, the lodge was intimately linked to Nahuatl cosmology, with the dualism regent *Ometleoh*, *Temazcaltoci*, or the God of Fire *Akuun Mbatsuun* (their names varied among each indigenous group) (Rojas Alba 2012b, 28-30). However, during colonial evangelization, the *temazcal* was prohibited and it progressively secularized (Alcina Franch et al. 1980, 102-103). As native Mexicans got acculturated into Catholicism, so did the lodge, which survived through incorporating Catholic beliefs, western medicine and even African traits (Menéndez 1992). The current use of the *temazcal* within the communities that have passed it over generations is depicted by this elder *curandera* in Oaxaca during an interview on the topic:

Interviewer: Which kind of conditions do you use the *temazcal* for?

Curandera: You do it when your body asks you for it. When your knee hurts, you go inside and squeeze with the steam; or when your body itches, or for headache,

and stomach ache...

Interviewer: Do you do offerings, songs, or prayers before, during or after the temazcal?

Curandera: No, my neighbor says that she wraps herself in *acote*'s smoke, but I just ask the *Virgencita* to heal me. (Magaña Perez 2011, 7)

However, the temazcal of my case study does not recreate that understanding of it described above. Instead, it is part of a newer network of actors that, since the eighties, has tried to revitalize the *pre-Hispanic* versions of the lodge from their own particular interests. I will refer to them as “postmodern” or “new” temazcales. On one hand, Mexican politics and tourism private industry have used the figure of temazcal to craft the nationalist image of Mexico around indigenous cultures (Elbez 2017, Rodriguez Martinez 2017). Meanwhile, neo-Mexicanism¹⁵ has recreated it in their endeavors to revive Mexican indigenous roots (De la Torre and Gutiérrez 2016, 170). From their end, ecofeminism, New Age supporters and the western therapeutic culture have built for themselves a mixture of Native American and Nahuatl lodges to practice their nature-based spirituality and achieve holistic healing (De la Torre and Gutiérrez, 2016). Additionally, a tendency of Mexican urban *temazcaleros* have emerged from a combination of previous ideas:

In many cases, the new practitioners, so-called *temazcaleros*, are college students, psychologists, anthropologists or sociologists that insert [the temazcal] in a new

¹⁵ The neo-Mexicanism movement in Mexico was a social, political, cultural and art movement that expressed the disenchantment with the official image of Mexican identity promoted by the state, as well as the media and tourist industries. This movement rather suggested a de-colonized self-representation of Mexico by tracing down its pre-colonial cultural roots (De la Torre and Gutiérrez 2016; Eckmann 2010).

constellation of ideas, including alternative medicine, heritage conservation, the return to different ways of human interrelation and the search for a new spirituality linked to the earth, nature and sustainability. (Arizpe 2009, 204; my translation)

Therefore, postmodern temazcales correspond only partially to the history of sweat lodges initially described. A basic difference lies in that they do not include catholic symbols (many of them are actually *against* mainstream religions, branded as colonialist). On the contrary, new temazcales are made of transcultural loans: They borrow aspects of Lakota-Sioux sweat, such as the sacredness of the number four for the lodge ceremony: New temazcales are often divided into four rounds and preceded by a prayer to the Four Directions (Bucko 1998). Similarly, they incorporate prayers, songs or traditional outfits from the *danzantes concheros* of Mexico (Rojas Alba 2012a; 2012d, 5-6), which were Mexihca dancers that perform a type of ceremonial and religious dance original from pre-Spanish times.

The wellness tourism industry has adopted its own version of the postmodern temazcal too. According to the Secretary of Tourism of Mexico (SECTUR), in 2013 28% of the spas in the country offered temazcales, ranking number thirteen among the therapies most offered (9). This temazcal merges wellness, medical, spiritual, and cultural tourisms (Johnston, 2006; De la Torre and Gutiérrez, 2016; Arizpe, 2009). According to my research on the web, these temazcales express differently within a range of two ends: One, the hotel boutique, predominant in the Pacific and the Caribbean, and oriented to mass upper-class tourism seeking beauty, medical and wellness treatments. Two, the camping, rural lodge and guesthouse in less crowded destinations of Central Mexico and

Oaxaca; their inexpensive temazcales carry a spiritual motif that emphasizes the revival of indigenous origins over beauty and relaxation. My study setting represents the first of those cases.

→ The study setting

My case study takes place in the town of Tulum, Quintana Roo, Mexico (fig. 2-3). In the Caribbean peninsula of Yucatan, the state of Quintana Roo holds the largest spa industry in the country (SEDETUR 2017). Consequently, in the past three decades a big part of the area has left the production of wood and chewing gum behind to concentrate on tourist capital; its revenue all along the year (Oehmichen-Bazan 2017, 201). Most of its tourism has middle to high socioeconomic status, mainly international from North American, but it also attracts national visitors (SEDETUR 2017).

The top destinations in Quintana Roo are the city of Cancun, the islands of Isla Mujeres and Cozumel, and the towns of Tulum, Mahahual and Bacalar. Their tourism offer is based on paradisiac landscapes that include long pristine coastlines, “cenotes” (natural pools created by the collapse of underground rivers), and the proximity to the UNESCO’s protected Biosphere Reserve Sian Ka’an, as well as to the Mayan archaeological sites of Chichen Iztá and Cobá. Each destination has used those assets to create their particular tourist character: While Cancun is more of an urban and familiar destination for wellness holidays, the islands present a nature-based scenario for swimming activities and a more alternative tourism. Particularly, Tulum mixes both profiles as a result of its evolution, to be described later.

Mayan culture is also one of the top reasons to visit Quintana Roo according to data from the Mexican Secretary of Tourism (Ojeda 2011). Certainly, the Mayan region

covers an area of 217,480 square miles, comprised of the Southeastern states of Mexico. In 1997, the secretary of Tourism started the corporate image of “Mayan Riviera” for the coastal corridor Cancun-Tulum, which has congregated lodging and wellness services for a mass tourism seeking luxury, exclusivity and Mayan cultural remains (Ojeda 2011). The Mayan brand has been much exploited as distinctive symbol of the region through the recreational, therapeutic and gastronomic supplies of the Riviera¹⁶. Such services perform an imaginary of the splendors of the Mayan civilization, which is dissociated from the contemporary Mayans (Elbez, 2017; Martínez, 2017; SECTUR, 2013; Oehmichen-Bazan 2017, 202). In the meantime, the Mayan of today inhabits the so-called *Zona Maya*, a hundred of rural communities settled in Quintana Roo’s jungle. *Zona Maya* represents a sharp contrast to the tourist gentrification of the coastline. It is composed by undersupplied villages, where Mayan is the only spoken language for many. Corn and harvests conform the base of the economy, and people considerably rely on Mexican Traditional Medicine for healthcare (Riviera Maya, n.d., Sandra’s house Mayan Ministry, n.d.). Migration to the tourist area is an exit for many, where they work as cheap labor in maintenance and housekeeping duties.

In Tulum, the growth of the population, urbanization and hotel infrastructure has multiplied vertiginously in the last twenty years. Today the number of inhabitants is over 30,000 peoples, which increases during the tourist season of November through April (INEGI 2016). Both the planning and later management of its urbanization has been very conflictive, including illegal concessions for private tourism investment and irregularities

¹⁶ In the interest of reinforcing the tie with the indigenous identity, the Fideicomiso de Promoción Turística de Riviera Maya has organized periodically events to commemorate Mayan culture, especially during because of the Mayan cosmological prediction (Fampress, 2012). That year registered a historical tourism rate in Mayan Riviera (DATATUR, 2017).

with aspects such as waste management. The national Supreme Court has stopped some of those endeavors, while others are still denounced by environmentalists, federal institutions, and local population (Observatorio del Turismo Irresponsable 2019).

Tulum's name means "rampart" in Mayan. Despite Mayan *temazcales* are important parts of the tourist image of Tulum, there is not a solid link between the Mayan community and sweat lodges (Elbez 2017; Rojas Alba 2012c; Maya Tulum n.d., *Temazcal Tulum* n.d.; Lonely Planet n.d.). *Temazcales* were found to be extremely common among the peninsular Mayans before and during colonial time, as indicated by many of my interviewees. However, they also underlined that the practice slowly disappeared after colonization to the point that it is mostly, but not completely, unknown in Quintana Roo today: "Surely, it does not have a ceremonial aspect, but it is aimed at detoxifying, like after labor, or as a relaxing bath" (Memo, *temazcalero*)¹⁷. The *temazcalero* Yao does talk about "*Mayaztecas*" to refer to local Mayans that "have learned the art of *temazcales* and the dancing of Tenochtitlan from Mexihcas masters". The other connection of local Mayans with lodges is in the hotels, where Mayans employed to conduct maintenance tasks help *temazcaleros* set up the fire for the ceremonies.

4.2. Results

→ Producing Tulum: The Tuluminati

In the last thirty years, Tulum has experienced two distinctive tourist phases. The first tourist phase dates from the years of the constitution of the Mayan Riviera product.

¹⁷ *Temazcales* are not lost among all Mayan descendants, though. Currently, they are an active therapeutic and cleansing bath in the highlands of Chiapas (Tozzer 1941 in Rojas Alba 2012b, 71).

The growing infrastructure around ethnic and cultural tourisms attracted Nahuatl descendants from Central Mexico in search of economic opportunities in the developing industry. They went down the Rivieran coast offering their cultural traditions, such as Mexihcan dancing performances or craftwork:

Xcaret Recreational Park is essential in this process. They brought an endless number of Mexihca dancers from the Big Tenochtitlan. Then, both parties became enemies and the latter created separate groups of dancers, and that is how the number of Mexihcas started growing in this Mayan land¹⁸. (Yao, temazcalero)

Unlikely but at the same time, the non-commodified natural paradise of Tulum grew a community of New Agy foreign and national travelers who settled down in the area. The temazcalera Sabrina sketches an image of it:

When I arrived twenty years ago there was a ball of hippies here. Many used to conduct temazcales. The only accommodation was shacks in the beach, with palm roofs, sand floors, and the Mayans lived in this side and the hippies in that side. Those hippies were together with the fishermen, and they were all a big gang. Few of them used to make the French bread, there was a pizzeria... Everyone used to do what he or she was good at, right? Things were sold in baskets and we used to chill playing drums in the beach all the time. Regarding alternative therapies... There was Maya Tulum, but that really started afterwards... The hotel boom was around 2009.

As Sabrina mentioned, the second phase of Tulum started about ten years ago. In

¹⁸ In addition to this one, I translated all quotes from my interviewees from Spanish into English to be accommodated to this thesis.

a massive ripple effect, Spanish, American, Italian and Mexican hotel chains have bought portions of the Tulumian coastline to build a wellness spa-resort industry based on luxury, exclusivity and non-western therapies. The power that these magnate hotels have acquired in Tulum is such that they are known in town as the “Tuluminati”. “It’s young people, rich, not older than thirty-five, who arrived here and wanted to set up something alternative... It became a luxury tourism” (Christian, guest experience manager). My interviewees described the average tourist as urban, mainly from the United States but also European and Asian, in an age range of 27 to 50 years old, and with high economic power. Additionally, ethnic tourism, including temazcales, does not seem to be a primary reason to visit Tulum; according to hotel managers, the main motivation is undergoing a personal retreat in the Caribbean wilderness, away from the city, where the tourist “can relax or realize something [personal] about himself” (Francisco, Azulik’s manager).

The capitalist restructuring undertaken by the massive arrival of the Tuluminati affected the entire outlook of Tulum. Coastline got fairly privatized and gentrified by upper class resorts, boutiques and restaurants headed by renowned chefs. Furthermore, Mayan curanderos, locals, and immigrated temazcaleros incorporated for the first time into the capitalist market as *self-employed therapists*:

Many elders started to give massages in hotels because we needed to fit in the new situation! I was struggling financially and my friend told me about being a masseur for Maya Tulum, and that kept me alive for four years. I talked with my old healer friends and everyone had started to invest in certificates from schools in Cancun and so on to get a job in the tourist industry here. Many people could get by. (Sabrina, temazcalera)

The described two phases of Tulum have given rise to a hybrid personality in the hotels. Rather than leaving out the previous New Agy spirit, they have integrated it into their conceptual identity. Thus, Tulum has configured itself, on one hand, as a classic western health resort, with high quality services for an upper-class market niche, and, on the other hand, with a New Age baseline philosophy, an environmentally friendly infrastructure, and a menu of non-western healing. Quoting the temazcalera Sabrina, “now those hanging-outs at the beach are sold as music therapy”. This way, Tulum conforms the “hippie-eco-sheek” destination of the Riviera (figs. 4-5):

Yes, Hippie-sheek. They are coming to this rustic, reconnection with nature...

They want luxury, but they want to feel that they are walking over sand, wood, have the ocean breeze, instead of cement or A/C. (Eli, Ahau manager)

That’s what’s different from Playa del Carmen or Cancun: People come to experience that concept of eco, rustic and sheek. (Christian, guest experience manager)

The hotels of this study, Maya Tulum, Azulik, Ahau and Holistika are some of the most representative examples of the hippie-eco-sheek character of Tulum’s tourism. As in almost all Tulumian hotels, yoga, Mayan massages and local plant-based treatments are the top products.

First, Maya Tulum is one of the first resorts that moved to Tulum offering a menu of alternative therapies, yoga and spa temazcales. It is focused at group retreats in search of peace, introspection and trauma healing; furthermore, “parties and noise are not allowed” (Valerio, manager); figs. 6-7 show its corporate identity, wellness discourse unfolded in chapter 2 and presentation of their temazcal. Second, “Azulik” (figs. 8-9)

means “blue wind” in Mayan, and it is one of the more exclusive and expensive resorts in Tulum, as the facility includes an art gallery, boutique, restaurant, and a wellness center with services going from egg cleansings (ritual from Mexican ethno-medicine) to tarot readings. It also has a prolific Mayan Spa, where “rather than massages or treatments, we call them ‘experiences’, ‘*Mayan experiences*’” (Francisco, manager). Third, Ahau (fig. 10) currently enjoys one of the highest affluences of clients. It is more affordable than Azulik and less strict than Maya Tulum, yet its services are very similar to theirs. Its strength is being eco-friendly in the use of energy sources and generated waste: “The logo we use now is ‘the nature is the new luxury’. This is how we create an environment that also gives the opportunity to (...) stop worrying about your day, your meetings, if you’re late... And be fully present with yourself” (Eli, manager). Lastly, Holistika (figs. 11-12) is the newest hotel, only six months old. It stands out for being the accurate representation of the therapeutic culture: It repeatedly self-introduces as a stress-free paradise. It hosts master-classes on topics from non-western paradigms and supplies a variety of mind-body fusions: “It is a core transformation even for those who work here: When you enter here, it’s a very special energy because we are in nature, not in concrete, so the message we get is ‘look, it is imperative to be more in harmony with nature’” (Cynthia, manager).

As introduced above, the hotel industry has adopted and adapted the Mayan merchandising to the holistic tourism of Tulum. In nearby destinations including Playa del Carmen or Cancún, “The Mayan” is mostly represented through aesthetic shows, as perceived by several of the temazcaleros and myself, during a short trip to Playa del Carmen downtown. In Tulum, hotels incorporate the indigenous brand in a way that is

coherent with their hippie-eco-sheek wellness narrative: They emphasize the Mayans' wisdom for healing and their sustainable use of nature. For instance, they associate their primitive-styled infrastructure to the stereotyped lifestyle of the Mayan civilization, strongly based on the Noble Savage's imaginary. The following quote is from Eli, Ahau's manager:

The temazcal is a traditional Mayan spa. It is the experience that the Mayan used to heal physical elements, emotional, mental and spiritual. We know now that with our thoughts we create the world, and that's something that Mayans did: they set an intention to find healing from within. When you do that, you're using your voice to stimulate certain glands, emotions, that's how you are connecting with the elements, so that's what it is: an opportunity to experience what the Mayan experienced.

Ahau explains the nature of their temazcales by invoking the western depiction of the Indigenous Other, bearer of authenticity and holistic healing wisdom. Also, during one of the temazcal ceremonies I experienced, an attendee engaged the temazcalero into a number of questions about the morbid-magical elements of Mayan temazcales in pre-colonial times. To that respect, the temazcalero Yao mentioned:

There are people who only want to admire the wisdom of the extraterrestrial Mayans. There are also people who are fascinated with the idea of their human sacrifices. I have found tourists hopeful to know the "shamans" to read their future and talk to them about their past lives. (Yao, temazcalero)

On a different instance, Azulik's manager described one of their Mayan services as follows:

We do readings from the [Sacred Mayan book] Popol Vuh, conducted by Mayan people. Tourists request them. We explain to them what it is, and the content of the book is reenacted through massage therapies: We use bamboo when it talks about the tree wood. We use local clay... Corn is employed to exfoliate the skin, and then we apply Aloe Vera... We do it for marketing purposes, but mainly to pay tribute to those old traditions. (Francisco)

The previous in-detail description of the identity of the hotels was essential to portrait the way temazcales are understood, presented and consumed in Tulum's wellness tourism industry: Hotels promote their temazcales as a pre-Hispanic holistic cleansing that fits into the integral experience that they provide: The reconnection with oneself in nature.

→ **Temazcaleros**

As I introduced earlier, none of the temazcaleros are local Mayans (or were instructed in the profession by them), but Mexicans from Central Mexico that have settled in Mayan Riviera. Also, there is one from Sweden. Their age range is thirty-forty. Their primary income is not from temazcal ceremonies, as they depend on the fluctuations of the tourism seasons. The following is a brief introduction of them.

Sabrina performs temazcales in hotel Ahau and at her residency in downtown Tulum, which she does not promote for tourism. As a Swedish masseur and naturopath, Sabrina moved to a Mayan village in Tulum twenty years ago and learned the profession of midwife by an elder of the community. For the past three years, she has learned to conduct a mixture of Lakota-Nahuatl temazcales from a Mexican temazcalero. Mar, natural from Mexico, moved to Tulum four years ago seeking job opportunities as an

alternative therapist. Working as a yoga teacher, she eventually learned the profession of temazcalera from a friend that runs local sweat lodges. Mar started performing them herself at a variety of hotels when was called to cover the tourism high seasons. Chris is a sporadic temazcalero at hotel Azulik. He is a Nahuatl descendent from Central Mexico, Mexihcan dancer, lawyer, and doctoral student in Anthropology. Chris learned “el camino” (the path) from the strict teachings of his elders, and alternates his job as a lawyer with some non-tourist temazcales at his farm, and a more consistent performance of lodges at Xcaret¹⁹, to where he arrived fifteen years ago because of “vocation and a spiritual signal”. Memo manages the temazcales of hotel Holistika. He studies transpersonal psychology and has been using sweat lodges for eight years as a therapeutic tool in such framework. Original from Mexico City, he moved to Quintana Roo four years ago to become a full-time therapist through a temazcal concept inspired in “a mix of different cultures”, he says. Lastly, Yao has run temazcales in hotel Maya Tulum for the past year since his friend Valerio, manager of the place, called him to cover the job. He is also a Nahuatl teacher. Yao learned to perform temazcales with a group of apprentices guided by a Nahuatl elder in Mexico City. In Yao’s tradition, the symbolism of the number four is key in the lodge’s ceremony; he is also requested to have his performance re-evaluated every year by his master for the first seventeen years.

The unique histories of these characters define they way they face their lodge’s ceremony in the hotels. While midwife Sabrina focuses her talk on women’s work and female figures such as Mother Earth, doctoral student Chris continuously refers to

¹⁹ Xcaret is a recreational park that reproduces the way of living of the Mayan civilization through plays and activities, and where lodges are said to have started their touristification in Mayan Riviera.

Nahuatl ancestors and deities: “The essences that rule the temazcal are water and fire. Any guide that goes like ‘oh, the spirits of the Being...!’, it is too New Age, the Being is simpler than that” (Chris). Memo conducts it in total darkness and music-absent to facilitate the introspective meditation that he pursues with his ceremonies.

As I have introduced, Ahau and Azulik identify their temazcales as Mayans. Meanwhile, the other two researched hotels specify that theirs are Nahuatls. The sweat lodge at Azulik is hosted in their “Mayan Spa” and named “Zumpulche”, a Mayan denomination for temazcal (although it is from a dialect not spoken in the area). The ceremony is also conducted by guides instructed in the Nahuatl tradition, and it is performed accordingly.

Apart from the new meanings attached to these temazcales, there are some other adaptations that the hotels of this study have carried out. First, every temazcal requires an English interpreter:

You can sing along even if you don’t understand the words and it will have an impact in you, but, if you know what you’re singing, don’t you think it’s going to mean a lot more? If you understand something, you’re going to have a better opportunity to learn something and take something back with you. (Eli, manager)

In economic terms, the ceremony has different prices according to whether the attendee is local or foreign. The foreign pays about 25 to 50 U.S. dollars more than the local, adding up to 75 U.S. dollars tourist-price in hotels like Azulik. According to this hotel, their prices respond to the high purchasing power of their average guest. Azulik also stated that, if someone manifests his or her vivid desire to attend a temazcal ceremony but cannot afford the whole cost of it, they would do a price reduction for the

costumer.

As to the duration and intensity, temazcales are usually adapted to the attendees. For instance, Maya Tulum shortens the duration of them as well as lowers the maximum temperature inside the lodge because, otherwise, “people pass out” (Yao, temazcalero in Maya Tulum). To experience the contrast with a local temazcal that does not have to undergo those adaptations, Sabrina compares it with her own lodge, which she works twice a week with local attendees (figs. 13-14):

I don't think there's a huge difference between our temazcal here at my place and the one we do at Ahau. However, the one here is in Spanish; we know the people who attend from previous times and we can work deeper and deeper through the ceremonies. Also, we can enlarge them as desired if there is a need: there is no hurry. The tourist one for me seems fleeting... It is superficial, they meet once and that's it... And, well, translation is exhausting.

Beyond some setup logistical aspects, the temazcaleros of this study agree that they are allowed the freedom to conduct temazcales as they know and feel, because “after all, *they* are the experts” (Cynthia, Holistika's manager). Thus, interviewees and fieldwork observations confirm that a fusion Nahuatl-Lakota in the technical parts of Tulumian lodges dominates in the area as a result of migration and cultural globalization. However, besides that, the independence of the temazcaleros to conduct the ceremony has translated into a *collage* of temazcal versions, where every guide contributes with his personal background, as explained at the beginning (see fig. 15-16 for temazcal in progress). Some other personal adaptations may include naked ceremonies to overcome fears or Ayahuasca intakes (data from Francisco, manager; and Yao, temazcalero;

respectively). Moreover, each performance develops in a different direction according to the motivations of the group to undergo the cleansing, so that the temazcaleros try to adapt each ceremony to those intentions:

There was a couple that told me they were “interested in the experience” but, during the ceremony, it turned out that he wanted to offer a prayer to his dad. He had a conflict with him and wanted to bring him medicine from the area. It was the peak moment of the ceremony. I asked him to verbalize his father’s name, place of birth and the location where he would send the prayer. He did it, and talked, cried, and yelled. Differently, some other time it was a couple that wanted to renew marital votes, so I focused the spoken topics during the ceremony on love, peace, respect, patience... (Chris, temazcalero)

In relation to the above, private temazcales are becoming trendy among Tulum’s lodging businesses due to reasons of privacy, exclusivity and the possibility of tailoring them with personal themes, as the managers Cynthia and Francisco point out. As a matter of fact, Azulik is planning on setting up “thematic temazcales” in a near future: “We want to have birthday temazcales, introducing as many stones as years the person turns-; uterus blessing temazcales; full moon’s, new moon’s... I’d like to have some Mexihca dancers while the temazcal is in progress...” (Francisco, manager)

→ Tourists

Different categories of interviewees agreed that most of tourists are first-time attendees that barely know about the temazcal (Cynthia, manager; Yao, temazcalero). Because of this, it is common for people to “expect a spa treatment, a sauna, and then they find out that it is... different, and get a bit scared during the temazcal” (Mar,

temazcalera). That is why some of my interviewees are very aware of the importance of explaining in detail the nature of the event beforehand. A smaller section is actively looking for it because they have done it before or heard about it.

The profile of tourists that attend temazcales matches the description given earlier in relation with the general tourism of Tulum. In addition, the background of the temazcal participants that I interviewed varied significantly from Mexican yoga teacher to New Yorker lawyer. Still, according to temazcalera Sabrina, “many of the them work in non-western healing, or have already walked a spiritual path.”

The reasons to undergo a temazcal were impossible to standardize within the sample of tourists at hand. However, many agreed that they sought the physical and emotional challenge of the ritual and intense heat inside the lodge. Often, pursuing an emotional and physical cleansing was point out. Finally, many expressed an interest in connecting with the natural setting and the Mexican ancestral roots. In a different spectrum, a group of sisters reported they wanted to try a new experience during their travels. It is important to note that, since many did not know about temazcales before, their expectations for the ritual generally mirrored the description that the hotels’ personnel did to them.

I’m staying at Ahau because of their Jungle Gym. (...) I’m coming out of a very abusive romantic relationship and I needed to just walk away from New York City and do *me*. (...) During my workout, an employee talked to me about the temazcal as a “life changing experience”, so that’s why I went. (Tobby, tourist)

On the other hand, most tourists entered the temazcal *without* any familiarity with the pre-Hispanic cosmologies invoked during the ceremony. They did have their own

tailored conception of God and spirituality, that sometimes matched up with the one expressed by the temazcalero in the session:

At some moment I connected emotionally with the words of [temazcalero] Memo about this land's ancestors...But not really... I have always had my belief in the power of the Universe, I used to talk to the stars when I was a child... So in that regard I didn't feel uncomfortable with that aspect of the ceremony. (Cala, tourist)

After the ceremony, all tourists reported relaxation and physical detox as their main outcomes. Those who to a lesser extent, emotional cleansing They also highlighted a feeling of connection at physical and spiritual levels. Michelle explained her experience to me:

I wanted to deepen my spiritual relationship with my boyfriend Daniel. But, interestingly, I connected with something else, the Feminine Power too. Sabrina's talk on the uterus of nature was like if I were in a women's circle, full of female leadership, female empowerment (...). I think I even held your hand at some point like 'come on, we can do this if we support each other.'

→ On cultural appropriation

During my interviews, it was recurrent to hear concerns about cultural appropriation. Mostly temazcaleros, but also hotel managers, denounce the presence of fake sweat lodge guides. These were defined as those who, in the only pursuit of

economic profit²⁰, exploit the indigenous merchandising of Mexico through elaborated shows that attract the curiosities of tourists:

Lots of people come from all over the world claiming to be healers or shamans and have a little bit of knowledge, and then they go and show off for tourists, because tourists are looking for something. And they say some key words from the indigenous lexicon and you think, “Oh wow! Super smart”. And that is part of my job here: To help identify and select the people so guests can have a real true experience. (Eli, Hotel Ahau manager)

Among other examples, one temazcalero reported: “I know a sweat guide that makes you smoke marihuana before entering, ayahuasca during the second door [part], peyote at the third, and bufo alvarius during the fourth. He claims to belong to the Camino Rojo, with Dakota origins” (Yao).

With regards to the possible misrepresentation of the Mayan culture, perpetrated by the hotels themselves, some temazcaleros admitted, shyly, cultural and historical incongruence in the lodges. Such is the case of the water temazcal, “temazcal de agua” in Azulik, which consists of a marble floor, an artistic painting of a Mayan at the front, and a water pool at the center of the lodge. Despite of it, perhaps because of a conflict of interests, they were well adapted to the hybrid recreations at the hotels and, beyond that, they are allowed to conduct the ceremonies in their particular ways.

At the end of most of my interviews on this topic, a common reflection seemed to rise among managers and healers, accurately captured by temazcalero Yao:

²⁰ In the logics of the temazcaleros, this means that they should have an aside temazcal themselves for the neighbors or close friends, as a reminder that traditionally, they should be in non-lucrative service to the community.

I think that at the end of the day, what it is important is to keep respect toward someone's beliefs. I consider that it is very dignifying for the Mayans that I know to put on a Mayan outfit, learn Mexihca dance and go out "to give the show", because they do it with their whole hearts. Yes, I can't maintain a deep conversation with them about those topics [epistemic aspects, traditional knowledge], but the most important is to put your heart in what you do.

Mayans who work at the hotels usually live in the less-urbanized and dangerous parts of Tulum. Their participation in the Mayan-imagined hotels is reduced to housekeeping and cooking tasks for a mediocre salary: "Here we try to treat them better than in other previous jobs. Mayans are certainly very exploited here and, besides, people use them for other interests..." (Memo, temazcalero). From Sabrina's viewpoint,

It's hypocritical when hotels here set up a temazcal, no? Because it is a tradition conducted in the indigenous communities, and that same business that sells it is not honoring those cultures. Because they abuse of Mayans' salaries, they exploit them at work, they break down their lands to expand their infrastructures...

Despite I could not have the opportunity to interview Mayan people on temazcales, I could observed their responses to the commodification of their cultural identity during two specific occasions: In the first one, I was attending an open Mayan service in a local Mayan Temple. As the only non-Mayan, I attracted all the curious gazes during the entire event. The only reference to tourists I could appreciate was a sign at the door: "Please, do not take pictures during the ceremonies". Fortunately, I was not carrying any cameras, and I tried to behave like one more. Soon, they offered me a plate of their traditional meal and we chatted gladly for the rest of the time. The second

anecdote occurred during a Mayan baptism ceremony in a nearby Mayan village to which I was invited. Maria, the Mayan priest, and I shared a conversation. Maria was a leader in her community: she conducts blessing rituals, helps give birth to women, coordinates and advocates for community projects, and is a curandera. During our talk, she narrated me a personal experience:

I worked with anthropologists for a long time. They stayed for a while. They worked for the community and used to ask me questions, and I told them about our traditions. Then they left, and wrote their papers for their doctorates and masters. And when I read what they had written, it wasn't like that. It wasn't what happened in the ceremonies they attended. It was all intellect, no emotions, nothing behind... Because they don't believe [in the efficacy of the ceremonies]. And they didn't come back either, to share or to give something back for what they received... Learning is not getting to know a piece of information; learning is a process of giving and receiving between two people.

For the same reason, Maria refused to talk about her traditional medicine. This protective attitude matched up with what my interviewees underlined about Mayans: Their reluctance to share information on their IK and practices with non-Mayan people. Thus, follow-up research would ask: Do these boundaries respond to a defense strategy against the repercussion-free commodification of their cultures?

4.3. Discussion and conclusions

The way the actors of this research understand and live the temazcal is entirely linked to Tulum's touristification and the evolution of its identity in the last twenty to thirty years. The type of hybrid tourism that the Tuluminati create, as the hegemonic

force in Tulum, has strongly configured the identity of the temazcal in such hippie-eco-sheek market niche.

On the other hand, the adaptations of the temazcal respond to the same pattern of *glocalization* described in last chapter. The lodge is subjected to certain standardization to function as a commodity (for instance, the same wellness discourse repeats throughout Tulumian hotels, and the duration of the lodges is adapted to the newcomers), yet that standardization is negotiated by the independence that temazcaleros have during the actual performance. Through their personal backgrounds and interaction with the attendees, healers are adapting the global parameters of the wellness temazcal to their local singularity.

The temazcal identity in Tulum is negotiated between the hippie legacy of town, the later sheek influence, the temazcaleros, and the Mayan western re-creation of the Other, to name the most prominent factors. Also, it is evidently influenced by its capitalist nature: In contrast to neo-Mexicanist, psychotherapeutic or feminist temazcales in the country, the fact that the Tulumian version operates as a *commodity*, entails that its meanings and adaptations depend significantly on the fluctuant demands of the market.

The study case of this paper dialogues with the previous literature in the following way. It is a reflection of a therapeutic culture that invites the westerner to look within in search of holistic wellbeing. Those temazcales merge new forms of wellness traveling from ethnic, to New Age, to alternative spas tourisms. Lastly, their location in the Mayan Riviera inserts a new ingredient into the recipe of these lodges: The non-western incorruptible virtues of The Indigenous Other.

The events described in this case study have potential impacts on Mayans IK. The

touristification of Tulum may be attracting the young generations of emigrated Mayans that, because of working in the Mayan hotels, are actually not participating of the continuation of their real Mayan heritage, or even learning traditional healing themselves within the original indigenous structures. Nevertheless, more investigation is needed on how many of the healing practices at the tourism infrastructure actually are practiced within the Mayan surrounding communities as part of their indigenous healthcare system. Without a legal framework that requires consultation and negotiation to borrow Mayan symbols, there are no legal repercussions for the labor intrusion, cultural misrepresentation, and excessive profiting repeatedly referenced by interviewees around the commodification of sweat lodges and Mayan culture.

This research had limitations. First, a well-known invasion of the seaweed “sargassum” alongside the coast lessened the expected hotel occupancy, resulting in the cancellation of temazcal performances and, therefore, reduced my opportunities of observation and interview. Second, I could not interview the local community in Tulum, especially Mayans, given to a lack of time in field. Therefore, in follow-up research, I would focus on incorporating the Mayan cohort. Key questions would be the level of familiarity of the Mayan community to the practice of temazcales. If any, I would research whether or not (and if so, how) the birth of temazcales at the hotels and their experiences working at them have impacted the frequency and the ways in which they conduct the practice. I would also capture their perceptions on the Mayan merchandising in Tulum, and their level of participation in the creation and conduction of Mayan treatments in the hotels.

FINAL CONCLUSIONS

Human society constructs every piece of reality according to its own beliefs, cultural systems, history and relations. This paper has analyzed why and in which ways that is done in relation to non-western medicines in the wellness tourism market.

In the last two to three decades, western societies have experienced a massive entrance of non-mainstream medicine in the wellness and wellness tourism markets. They conform the pluralized itineraries of a western patient-client more oriented to self-care, with a wider definition of health as *holistic*. These new health logics are framed by a social tendency to psychologize our social life and seek self-fulfillment in foreign spiritualities. On the other hand, the echoes of disenchantment with postmodern society, the mass and diversified tourisms and cultural globalization have contributed to awaken an interest in non-western healing.

Those interests and tendencies have developed in the form of capitalist consumerism, generating a millionaire wellness market. Wellness tourism sector is a fundamental piece in the commodification of non-western medicine. While in the western location of departure there is an extensive supply of non-mainstream wellness services backed up by a look back to foreign philosophies, in the non-western destination of arrival there is a rapid development of the tourism industry ready to generate national income exploiting the new tourist tendencies of the west. Therefore, non-mainstream medicine has incorporated to New Age, ethnic and spa tourisms.

The discourse of non-western medicine understands health as holistic, polysemic, spiritual, and partially self-managed; while these commodified therapies are sources of

pleasure, experiences and, importantly, de-contextualized from their philosophical basis, where they are part of life-integrating models that are reinterpreted or omitted in their transculturation. Non-western healers also carry the stereotype of the Noble Savage, a wise and eco-friendly indigenous that represents values attractive to the curiosities of new tourists. In the touristification of an indigenous medicine, their exotic and familiar elements have to be negotiated to conform a market commodity.

The ethnographic part of this paper has shown me that the identities of commodified medicines are not entirely imposed by the needs of the market, but *negotiated*. I believe that other actors beside the supplying businesses gracefully employ certain agency over the performance of their legacy that enables them to *also* participate of the commodification of non-western healing. Nevertheless, in the other end of the scope, I also realized that, if incorporated as a commodity, non-western healing will primarily seek the profit beyond and at the expense of other values that it may live by *outside* the market net.

Furthermore, although not directly addressed in this paper, the findings of this work challenge the ongoing assessments on “authenticity” over non-western medicines in the market. Not only they are imported into a *different* culture, but also, as commodities, they considerably depend on supply-demand. Consequently, they are subjected to new priorities, managed by different hands, and carry some of their previous identity markers *and* new ones that are acquired in their accommodation process; they do not signify the same in the west than somewhere else, they carry multiple meanings. Therefore, those facts may make governments, tourism stakeholders and indigenous rights advocates rethink the issue of “authentic” tourist medicines from the start-point that commodified

healing is always going to be (*com*)modified healing: a cultural hybrid in the wellness industry resulting from its des- and re-contextualization from its original context into a completely different one.

Future directions of this topic could contribute to a better understanding of cultural appropriation in the growing ethnic-based tourism industry. It would be essential to do it from the perspectives of indigenous peoples, if they are willing to offer them, including the Mayan community in Tulum: How do they define “cultural appropriation”? Do they think that heritization projects are actually protecting the continuity of their cultures? To what extent do they perceive the touristification of their traditions as a way out of impoverishment, a strategy for global visibility, or an offense to the core of their identities? Are there other elements endangered in the process, such as environmental ones?

The above are some important questions for scholars from or working on Latin America, as their wellness markets are rapidly incorporating indigenous cultural and ecological heritages. It is my wish that it helps policy makers and tourism businesses discuss the matter in a more participatory way with local populations. Also, the explicative framework that this thesis provides on non-western commodification may further the understanding of why the West is today engaging in cultural appropriation, in a way that positively contributes to the debate between natives and non-natives peoples of Latin America.

VISUAL APPENDIX



Fig. 1. Representation of a temazcal in the *Magliabechiano Codex*. Source: Arqueologia Mexicana Web.



Fig. 2: Location of Quintana Roo over a map of Mexico. Source: Wikipedia.

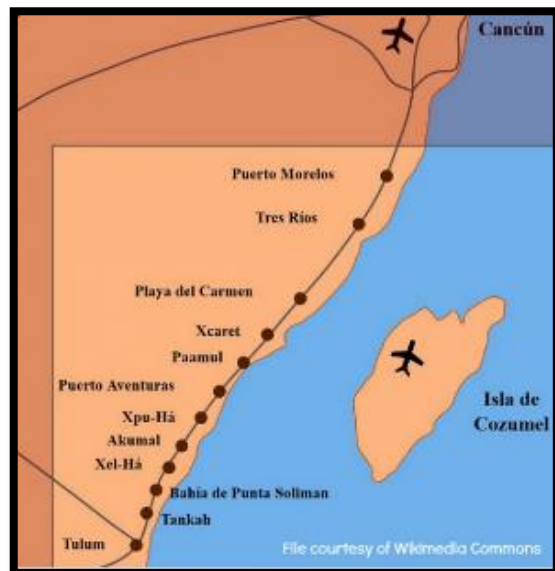


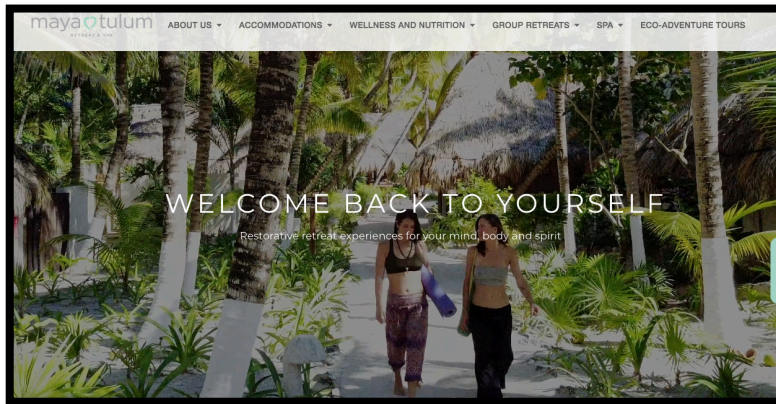
Fig. 3: Municipalities within Quintana Roo. Source: Wikipedia.



Fig. 4. Eco-hippie-sheek identity of Tulumian hotels. Temazcal structure at the bottom. Source: Yaan Hotel's online site.



Fig. 5. Tourist street in downtown Tulum. Source: Myself.



Figs. 6-7 (up and down): Maya Tulum Hotel. Exemplification of the visual and verbal use of the wellbeing discourse, targeting young alternative costumers interested in holism and shamanism. Source: Maya Tulum's online site.

Temazcal

Maya Tulum Retreat & Spa offers an on-site Temazcal (Sweat Lodge), where local healers perform body & soul-cleansing Indigenous ceremonies. This universal ritual benefits the body and the soul, balancing your mind and emotions for inner peace and harmony. A spiritual guide will help you to open your heart to ancestral visions, while releasing stress and detoxifying the body through series of four guided meditations accompanied by chanting and ancient music.

120 minutes
\$70 per person

Private Temazcal ceremonies are available upon request.






Fig. 8: Azulik Resort-Boutique. Facilities of the hotel at the left menu. Source: Azulik's online site.

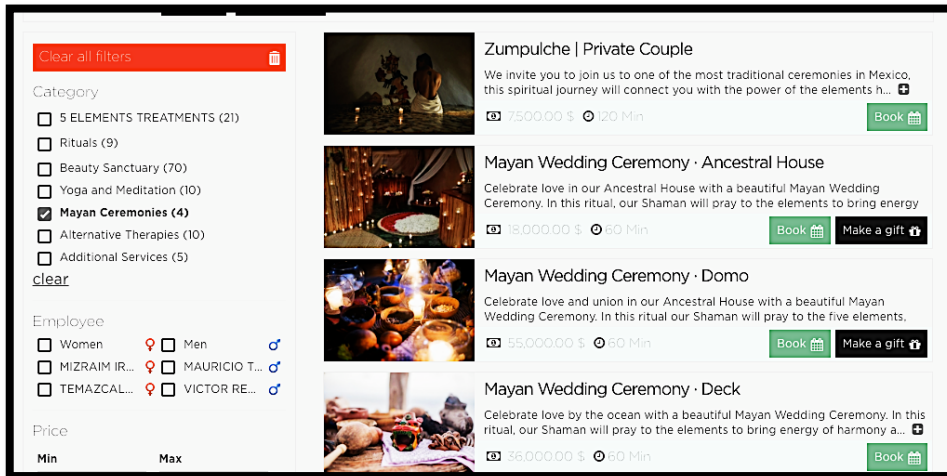
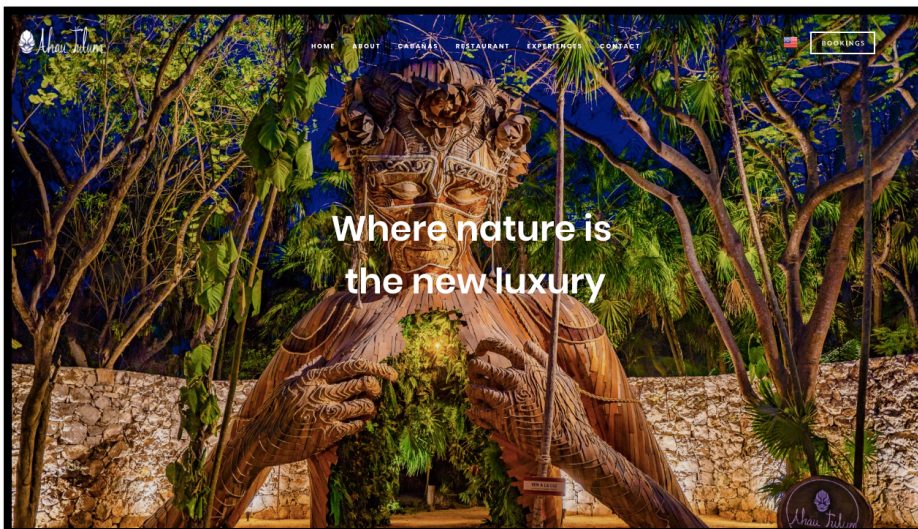
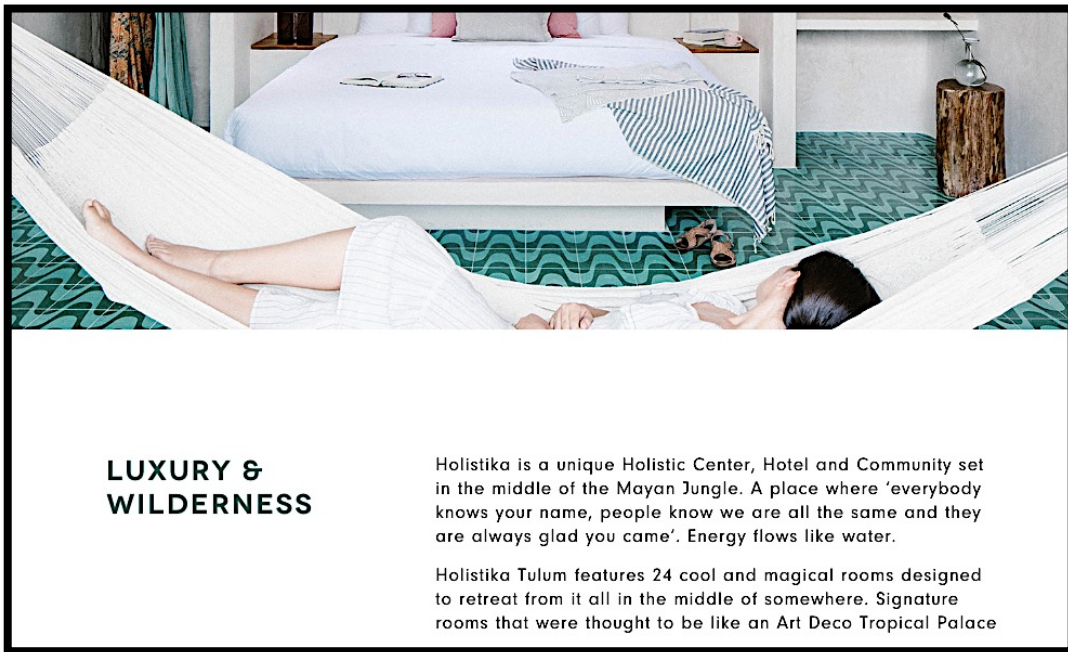


Fig. 9: Azulik Resort-Boutique. Mayan brand accommodation. Temazcal as referred as “Zumpulche”. Source: Azulik’s online site.



Figs. 10-11 (left): Ahau Hotel. Note the marketing linked to the concept of nature-integration and indigenous motifs through the main entrance. Source: Ahau’s website





Figs. 11-12 (up and down): Holistika Hotel. Note, particularly, the corporate spiritualism through the statement “where everybody knows your name”, as well as the typical message from the therapeutic culture in the yellow traffic sign. Sources: Fig. 11 – Holistika’s online site; fig. 12 – Myself.





Fig. 13: Local temazcal ceremony at Sabrina's midwife house. Source: Myself.



Fig. 14: Sabrina's midwife house. Source: Myself



Fig. 15: Participant observation in a temazcal ceremony at Hotel Holistika. Temazcalero Memo jingling a seashell to honor the spiritual guardians of the temazcal before entering the lodge. Source: Anonymous.



Fig. 16. Continuation of fig. 15. Group prayer to each of the Four Directions from the Lakota sweat lodge tradition. At the center, a typical vessel burning copal (Nahuatl style). Before entering the lodge, the attendees are smoked with copal to cleanse them from spiritual loads. At the right bottom it is the fire that heats the stones. The white lodge is behind the group. Source: Anonymous.

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